

HOMŒOPATHY:

ITS NATURE AND RELATIVE VALUE.

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WITH AN APPENDIX.

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ABERDEEN:

D. WYLLIE AND SON.

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“Moral evidence is, after all, principally strong or weak as the human mind chooses to make it; and though the sun may shine ever so clearly, man can always make it day or night just as he pleases, by simply opening or shutting his eyes. Evidence is adjusted to our state as one of *moral* probation, and will never be found such as to overbear our judgment or compel our assent, or such that it shall not be in the power of ingenious perverseness plausibly to evade it. In all cases men are apt vastly to over-estimate the effect of a novel and seemingly cogent piece of evidence, and to under-estimate the skill of wayward ingenuity in destroying or neutralising it.”—HENRY ROGERS.

“ Πάντα δοκιμάζετε τὸ καλὸν κατέχετε.”

PREFACE.

It is with extreme reluctance that I publish this pamphlet. Questions of medical opinion should not be dragged before the public—a principle I would be the last to violate. But when a “reckless attack” is made on my professional character, when attempts are made to “blacken and discredit” it, I am constrained, in self-defence as well as in the interest of truth, to give publicity to the contents of the following pages. The whole responsibility of forcing this step upon me lies on the heads of those who were so ill-advised as to challenge my therapeutic opinions. They have appealed to the public in the first instance, and I now meet them before the same impartial tribunal.

So far from seeking a rupture with my brethren, it has all along been my most anxious desire to keep on friendly terms with them. Knowing their traditional horror of Homœopathy, I refrained from using the “bad name” as much as possible (except when I had to condemn its errors), in order to remove their unfounded prejudices. I explained to them my views publicly and privately, met their objections, tried to remove their difficulties, and assumed a position midway between the old and the new systems, in the hope of helping forward a reconciliation. In this hope I was encouraged by communications from medical men in all parts of the country. I conducted everything in the most free and candid manner. All in vain. Even small doses of regularly authorized medicines are as offensive to them as Homœopathy.

Had I been let alone, and granted that toleration which is due to all—had I been allowed to persevere in my humble efforts to advance the interests of medical science—this pamphlet would not have been written. But having been forced into a position of antagonism, I wash my hands from all the evil consequences which may result therefrom.

I bring but one charge against the profession. Its leading men are honest enough, as will be seen, to confess their ignorance, and this is so far a step towards knowledge. This confession is a proof of the upright character which the profession as a body deservedly bears. But the one stain on its character, the one blot, is its treatment of Homœopathy. For this no excuse can now possibly exist. I deeply regret that the liberal and independent medical men, of whom not a few are to be found in this city, and who are opposed to all intolerance, should be involved in this transaction. I take this opportunity of acknowledging the kindness and forbearance which I have all along received at their hands, as also the courtesy with which I was treated by the Members of the Medico-Chirurgical Society who did me the honour to listen to my papers. I feel satisfied that *they* have no sympathy with the circumstances which have led to this pamphlet. They are entirely exonerated. It is unquestionably their duty, however, for the sake of their own credit with an enlightened public, as well as their much-abused Homœopathic brethren, to unite in the earnest endeavour to remove the one stigma affixed to their otherwise honourable calling. I do not ask them to believe in Homœopathy until they prove it by practical trial; but I would urge on them the duty of securing for it as free toleration as any other medical opinion.

It is impossible, within the limits to which I am restricted

in these pages, to give more than a very cursory outline of Homœopathy. Enough, however, has been said to dispel the erroneous impression that it is a system of globules and infinitesimal doses, and that those who practise it swear by it alone to the exclusion of all else. I hope this impression will now be removed. As for myself, I have always acted on the principle that the best treatment is that which cures the patient in the speediest and most pleasant manner, whether it be Allopathic or Homœopathic. I am not a Homœopathist in the sense generally understood by that term—believing and practising nothing but the system of Hahnemann (such a being is a *rara avis in terris*); I am an Eclectic, free to adopt what my experience declares to be right, unfettered by any medical dogma whatsoever.

The attention of medical men is specially directed to the Appendix, by Dr. DYCE BROWN. I hardly conceive it possible for an unprejudiced mind to resist such a mass of evidence in favour of Homœopathy as is there presented. I may add that, after long investigation and experiment, it must surely be a very powerful delusion which would make us run the risk of forfeiting professional caste, and destroying that good name which is the sole dependence of a medical man.

39, UNION PLACE,
ABERDEEN, November, 1868.

PREFACE TO THE SECOND EDITION.

SINCE the publication of the first edition, my connection with the Aberdeen Infirmary has ceased, in consequence of a threatened resignation on the part of my former colleagues, in the event of my re-election.

Homœopathy, however, is making rapid progress. In addition to the facts stated in the text, there have been numerous evidences of the great hold which, in its present form, it is taking of the public mind. A few of these may be noticed :—

1. The French Government determined, recently, to appoint a Professor of Homœopathy at the Sorbonne, and Dr. Léon Simon, an eminent Homœopath in Paris, has been chosen for the office.

2. At Toulouse, the Government has appointed Dr. Arréat for the same purpose.

These two appointments are exclusive of the Professor at Montpellier, who recently gave in his adhesion to Homœopathy, and who, notwithstanding, was permitted to retain his chair.

3. The Editor of a French Medical Journal has lately appealed to his readers to investigate Homœopathy, “without enmity, without fear, like men honest and free.” He is now inserting a series of articles on the subject from the president of the French Homœopathic Medical Society.

4. *The Medical Press and Circular*, one of the London weekly Medical Journals, has, *at last*, demanded a fair hear-

ing for Homœopathy. After lamenting the downfall of old therapeutics, the Editor says :—" Truth is best advanced by struggling openly with error : and we should like to see the Homœopathists and others get a hearing. * * * But as it is at present, our drug-keeping brethren, like the silver-smiths of Diana of Ephesus, will not let the goddess be assailed." This is a tremendous stride for an Allopathic Journal to take ! What next ?

5. In Rochdale, it has been determined to open and maintain a Homœopathic Ward in the New Infirmary to be erected there, and this, too, notwithstanding the fact that twenty of the medical men in the town have signed a declaration to the effect that they will have no connection with the Infirmary if Homœopathy is permitted in it.

6. The Legislature of Ontario, in British North America, has raised the Homœopaths to the same level as the Allopaths—giving them five representatives at the Board of the Medical Council.

I notice in the pamphlet the continual appropriation, by Allopaths, of Homœopathic doctrines and practices, without acknowledgment. This is becoming more and more glaring. The therapeutic opinions—nay the doses—for which I was dismissed from the Infirmary here, have, within the last two months, been reproduced in London, without reference to their Homœopathic origin, by three of the leading Physicians. This I shall shew, if the fact is called in question. *Sic vos non vobis*. So much for my so-called " crude, undigested, *dogmatic* " opinions.

In conclusion, I would again urge my brethren in Aberdeen to throw aside all prejudice, and candidly investigate Homœopathy for themselves. The younger men will be compelled, in

self-defence, to examine it sooner or later; and such, I may add, is my confidence in the soundness of these principles, and also of the willingness of the profession to adopt every practical improvement in relieving human misery, that I do not despair of seeing—better than a Homœopathic ward—the whole medical staff of our Infirmary warmly supporting the method of treatment which, under a hated name, they now decry.

ABERDEEN, *March*, 1869.

HOMŒOPATHY:

ITS NATURE AND RELATIVE VALUE.

THE condition of medicine at the present time is, in the highest degree, unsatisfactory. For centuries the profession has been endeavouring to obtain an exact knowledge of the properties of drugs, and of their application to disease, and yet, at this late period, the most eminent physicians are obliged to confess that the subject is in utter confusion. There are no fixed principles of treatment—no trustworthy laws for the selection and application of remedies—but medicines are prescribed in accordance with prevailing custom or hereditary tradition, the reasons for their employment being very indefinite or wholly unknown. The treatment of disease is thus left to the discretion and pleasure of individual physicians; whence arise antagonistic opinions and conflicting recommendations, completely bewildering the student, and rendering the profession the butt of ridicule.

Lest these statements should appear too strong, and unwarranted by facts, let me quote the opinions of some of the leading medical men in corroboration. The late Sir John Forbes says—"What, indeed, is the history of medicine, but a history of perpetual changes in the opinions and practice of its professors respecting the very same subjects, the nature and treatment of diseases?" "This comparative powerlessness and positive uncertainty of medicine is also exhibited in a striking light when we come to trace the

history and fortunes of particular remedies and modes of treatment, and observe the notions of practitioners at different times respecting their positive or relative value. What difference of opinion, what an array of alleged facts directly at variance with each other, what contradictions, what opposite results of a like experience, what ups and downs, what glorification and degradation of the same remedy, what confidence now,—what despair anon—in encountering the same disease with the very same weapons, what horror and intolerance at one time of the very same opinions and practices which, previously and subsequently, are cherished and admired!" "Things have arrived at such a pitch that they cannot be worse. They must mend or end."* The same writer comes to the following conclusions:—1st. That in a large proportion of the cases treated by Allopathic physicians, the disease is cured by nature, and not by them; 2nd. That in a lesser, but still not a small proportion, the disease is cured by nature in spite of them; in other words, their interference opposing, instead of assisting the cure; 3d. That, consequently, in a considerable proportion of diseases it would fare as well, or better, with patients, in the actual condition of the medical art, as more generally practised, if all remedies, at least all active remedies, especially drugs, were abandoned.

Sir Henry Holland in 1839 said—"During the last twenty years, omitting all lesser instances, I have known the rise and decline of five or six fashions in medical doctrine or treatment."†

In an address delivered two years ago, Professor Bennett of Edinburgh, said—"Up to this moment there is an uncertainty about the action of numerous powerful drugs in daily use, which is a constant reproach to us, and which we should make a strong effort to remove."‡

* *British and Foreign Medical Review*, Jan. 1846; Art. xxi.

† *Medical Notes and Reflections*, 1839; p. iii.

‡ *British Medical Journal*, 18th August, 1866.

The editor of the *Medical Times and Gazette* made the following remarks in 1864. After stating decidedly that the practice of medicine was, and always had been empirical and in the highest degree uncertain, and describing a discussion in which not fewer than seven different opinions were expressed regarding the treatment of a very simple and well-known disease, he says, "We learnt nothing of the *rationale* of the treatment from the discussion; and, be it observed, the disputants were not country apothecaries, but London physicians and surgeons. We could not help thinking, not 'C'est magnifique,' but 'C'est bien amusant, mais ce n'est pas la science.' And if we go to men or books for the treatment of internal disease, what do we find? Take rheumatic fever: One treats it with calomel and opium, one with opium only, one with lemon juice, one with nitrate of potash, one with alkalies, one with quinine. Or scarlet fever: A swears by ammonia; B by quinine from the commencement; C adopts a regular system of treatment by emetics, purgatives, and quinine; and so on; we might fill our columns with examples of this kind, and to very little purpose."*

Dr. WILKS, in the *British Medical Journal* of 8th August, 1868, says—"In peritonitis, arising as it does from so many causes, and judicious practitioners not existing in too great a number, I verily believe, though reluctant to declare it, that the patient's friends had far better never send for a doctor. If I were seized with a sudden peritonitis, and could only utter a few words, they would be, 'For God's sake leave me alone.' . . . A large amount of treatment at the present day may be summarized as 'keeping up the patient,' equally satisfactory to himself and his friends."

Lastly, not to multiply quotations, Sir THOMAS WATSON last winter delivered an address to the Clinical Society of London, in which he thus expresses himself:—"We have

* *Medical Times and Gazette*, Dec. 10, 1864.

attained to a great degree of certainty in the detection and discrimination of disease in the living body. We know tolerably well *what* it is that we have to deal with, but we do not know so well—nor anything like so well—*how* to deal with it. This is more true, no doubt, in the province of the physician than in that of the surgeon, but it is lamentably true in both provinces. . . . To me it has been a life-long wonder how vaguely, how ignorantly, how rashly, drugs are often prescribed. We try this, and not succeeding, we try that, and, baffled again, we try something else, and it is fortunate if we do no harm in these our tryings. Now, this random and haphazard practice, whenever and by whomsoever adopted, is both dangerous in itself and discreditable to medicine as a science. Our profession is continually fluctuating on a sea of doubts about questions of the gravest importance. . . . I say this uncertainty, this unseemly variation and instability of opinions, is a standing reproach to the calling we profess. It has shaken the faith of many men, of men both able and thoughtful, and driven them to ask themselves whether any kind of medication other than the *vis medicatrix naturæ* is of any real efficacy or value.”*

The Editor of the *British Medical Journal*, in commenting upon Sir Thomas Watson’s address, says :—“That our empirical treatment should be so uncertain and contradictory is, nevertheless, a shame and reproach to us. We prescribe medicines every day, of the action of which we know literally nothing, the belief in their virtue being held in vague tradition, or founded on the wildest theory.”†

The same confession of ignorance is made by Sir James Simpson in his graduation address at the University of Edinburgh a few months ago, and must be fresh in the minds of all.

The consequence of this lamentable state of matters is,

* *British Medical Journal*, 18th Jan., 1868.

† 1st February, 1868.

that many physicians have more or less abandoned the practice of administering medicine. They leave disease almost entirely in the hands of nature, allowing it to run its own course, and merely prescribing stimulants and nutritious diet. This system is unquestionably preferable to, and more successful than, the habit of giving drugs. It allows nature to exercise her own undoubted powers unchecked, and thus contributes much more surely to the recovery of the patient. If a fatal result ensue, it is not accelerated by undue interference on the part of the doctor. The patient, at least, dies a *natural* death. An honest physician in such a case must necessarily feel deeply his helpless condition. He must feel humbled that more confidence is reposed in him than his knowledge warrants, and that, although he can tell accurately the nature, course, and result of the disease, as regards treatment he is little more competent than a well-trained nurse. The question, "What is the use of a doctor?" is often more easily asked than answered.*

Deeply sensible of its comparative inability to meet and cope with the ravages of disease, the medical profession has been for many years anxiously seeking for a rational basis of treatment. Many theories have been started, but none of them have stood the test of experience. One by one a whole dynasty of systems of treatment has risen, become fashionable, and fallen, leaving physicians as much at sea as ever. The great object of inquiry is—Has the Creator appointed a law of cure in disease as universally applicable as gravitation or any other physical law? The importance of such a law, did it exist, is universally admitted. But the general opinion is that it has not yet been discovered, while many believe it impossible for a

* The mechanical and operative departments of surgery and midwifery are, of course, excepted; in a few cases also in medicine, the physician has the power to alleviate or cure, but even then the remedies in most cases act Homœopathically.

law to be so constituted as to embrace within its operation the endless variation of disease.

Nevertheless, such a law does exist. I regret to say that, in the midst of its ignorance, in the midst of its anxiety, in the midst of its blind groping after truth, the medical profession has deliberately and wilfully shut its eyes to a fact patent to all the world, that a law has been discovered which guides, with more or less certainty, to the remedies for the cure of diseases not absolutely incurable. This law is the system of treatment known as Homœopathy, a system which has given rise to more misunderstanding and been subjected to more abuse, than perhaps any novelty that ever claimed the attention of the world. Erroneously supposed to be a system of globules and infinitesimal doses—so much so that the name Homœopathy is generally believed to be synonymous with globulism or infinitesimalism—it has endured an almost unequalled amount of obloquy and reproach. In order to remove this misconception and ignorance, I will now enter upon a brief exposition of the whole subject.

Homœopathy, then, is the method of treatment which purposes to cure disease by medicines which produce, in the healthy body, symptoms similar to those of the existing malady. Its principle is expressed by the formula *similia similibus curantur*—likes are cured by likes. For example, one of the medicines selected to cure sickness is ipecacuan, which, as every one knows, causes similar symptoms when given in a large dose to a person in health. To cure diarrhœa, the medicines prescribed are those which induce similar action in health, *i.e.*, purgatives, and so on. If, however, these medicines be given in the quantities necessary to cause sickness in the one case, or a purgative action in the other, an aggravation of the disease will obviously result, instead of a cure. The doses must, therefore, be much less. This arises from the now universally acknowledged fact that medicines have a two-fold action on

the body—a primary and a secondary—the latter being a reaction from, and a necessary consequence of, the former, and each being the very reverse of the other. Disease, in its most frequent forms, and medicines resemble each other in producing these two actions on the system in succession. In its ordinary manifestation, disease is analogous to the secondary action of a drug, and hence, to effect a cure, the drug is chosen which, in large doses, will produce symptoms resembling those of the disease. It is administered, however, in a dose so small as only to excite its primary action, which, being the reverse of the diseased condition, thus effects a cure.* The small dose is further necessitated by the fact that a diseased organ is greatly more susceptible of the drugs which act on it than a sound one, so that doses of medicines which are inappreciable in health become powerful in disease. An analogous susceptibility exists in an inflamed finger, or an inflamed eye, the slightest contact with the former, or the least particle of light admitted to the latter, producing extreme pain. How small the dose must be, which will produce a curative effect and no more, depends on the particular case, and in general has to be decided by experience. Some cases require material† doses, while others can only be benefitted by such a reduction as has received the name of infinitesimal. Of this I shall speak more hereafter. The chief point in Homœopathy is its principle—*similia similibus curantur*—likes are cured by likes; the dose being altogether a secondary matter. If the principle in the selection of medicines be adopted, the amount of the dose can be afterwards determined by experiment.

The old system of medicine proceeds on the assumption that opposites are cured by opposites, or *contraria contrariis*

* This subject is fully discussed in my papers *Edinburgh Medical Journal*, February April, and September, 1868.

† The term “material” is used here for convenience, and as a contrast to “infinitesimal.” All doses which cure are, properly speaking, material.

curantur, and hence has been denominated Allopathy. It proposes to cure diseases by medicines which produce effects the reverse of the malady, *e.g.* purgatives to cure constipation, leeches or bleeding to relieve determination of blood, blistering, &c. The term Allopathy is objected to, because, say physicians, they wish to cure their patients, independently of systems, and, therefore, they cannot be termed Allopaths. It is, nevertheless, true, that in whatever way medical men endeavour to relieve their patients, the means they select mostly always act on the Allopathic principle—a principle so wrought into their habits of thought that they cannot divest themselves of it. The term is, therefore, justly applicable to their system. Now, there can be no doubt that this principle is properly enough adopted in a few instances, the nature of the cases demanding it; but in the vast majority of diseases, according to universal experience, as evidenced by the testimony of eminent men, quoted a little ago, this method of treatment not only has no influence at all, but really does an immense deal of harm. It would be easy to fill a volume with a description of the baneful effects of the Allopathic system. How many people are rendered invalids for life, not, as they fondly imagine, in consequence of their illness, but in consequence of its treatment! They are habitual sufferers from drug-diseases. The medicines which were poured into them have remained embedded in their systems, and give rise to a constant valetudinarianism. Much of their so-called delicacy is due to the presence in the body of mercury, aloes, and other drugs, which they are in the habit of taking. That this is not fancy, we have the testimony of Dr. Macleod of Ben-Rhydding. He describes how frequently, during Hydropathic treatment, patients exhale through the pores of their skins aloes and other drugs, in such quantity that the room is tainted with their peculiar odour, which, in some instances, is so strong as to be scarcely endurable. In every point of view, Allopathy is a most

pernicious system ; and, according to the confessions of its own adherents, does more harm than good. What else could be expected from a system which attacks healthy organs by drugs, in order to cure diseased ones, thus producing two diseases instead of one ?

Homœopathy, on the other hand, acts only on the diseased organs. In accordance with natural indisputable laws, the dose administered, while it influences the affected part, is powerless elsewhere. If the medicine selected be not suited to the case, no effect follows its administration, either on the disease or other parts. If, again, the symptoms be increased by the medicine, it is a proof that the proper remedy has been chosen, but that it has been given in too large a dose. An Allopath, when he finds a medicine produce an aggravation of symptoms, contents himself with the unscientific idea that it does not agree with his patient, and accordingly suspends its administration ; while a Homœopath infers that the proper medicine has been given, but in too great a quantity : he, therefore, reduces it until he reaches the curative dose. He thus at the same time avoids injury and effects good. In the former case, the doctor does not know what he is about : he prescribes at random, without any rule to guide him. In the latter, the doctor proceeds on a definite, well-ascertained plan, guided by the law of similars. Homœopathy is as much a natural law as the ordinary physical laws of the universe ; and in most cases, where disease is curable by natural means, this law will guide with more or less certainty to the remedy.

The principle of Homœopathy has been recognised from the earliest times. It was a saying of Hippocrates, the Father of Physic, that some diseases are cured by medicines which produce similar effects, and others by medicines which produce opposite effects. The following is a Homœopathic passage from his works : “ Give the patient a draught made from the root of mandrake, in a smaller dose than

will induce mania.”* This in order to cure mania. The principle, however, does not appear to have been generally acted upon till the end of last century, the prevailing dogma being that of Galen—*contraria contrariis curantur*. About seventy years ago, the doctrine of similars as an universal law was first promulgated by a German physician, Dr. Samuel Christian Friederich Hahnemann, practising in Leipsic. This extraordinary man, who, so far from being a visionary and illusionist, is regarded by Sir John Forbes and others of eminence as one of the greatest men that ever lived, had, while yet a young man, attained a high position in his profession, when he became disgusted, like many others before and after him, with the uncertainty of medicine. He abandoned his practice in despair, and devoted himself to the work of translating books. While thus engaged in his retirement, he came upon a remark of Cullen in his “*Materia Medica*,” that bark caused ague, and cured it. This remark developed an idea which had been germinating in his mind—as did the casual words dropped by the country girl in the hearing of Jenner. By degrees he worked out his two great doctrines—that drugs must be tested on the living, healthy body, in order to ascertain their properties, and that likes are cured by likes—*similia similibus curantur*. With a zeal, an energy, an indefatigable industry, seldom equalled, never surpassed in the annals of science, he prosecuted his investigations, examining each drug in succession, testing it upon himself and others, until he had gone over most of the known medicines of his day. His writings contain 80,000 different observations—a proof of the extraordinary determination and perseverance with which he laboured. On bringing the law of similars, which he had discovered, to bear on the treatment of disease, he met with a success exceeding his expectations. Cases which had baffled the old system now yielded like magic to the new.

* *Hippocrates, Syd. Society* vol. 1, p. 77.

Acute diseases were far more speedily, safely, and pleasantly cured, and the mortality from them greatly diminished. Chronic diseases, which had spread over many years, were cured in a few weeks. On all sides the testimony was overwhelming in favour of the Homœopathic law.

At first, Hahnemann encountered little or no opposition from his brethren. His doctrines were published in Hufeland's Journal in 1796, and commanded general attention. We find him quoted in several medical periodicals as an authority for the successful treatment and prevention of scarlet fever, according to the law of similars. So late as 1824, before the introduction of his peculiar system into this country, an English medical journal speaks of the same subject, and of Hahnemann as its originator. But, in the course of his investigations, Hahnemann found that many of his patients were made worse by the doses he prescribed—that, although a number were rapidly cured by material doses, a large proportion had their symptoms aggravated. This led him, by the mere force of experiment, to diminish the dose, doing so gradually until the point was reached where aggravation ceased, and the primary curative action of the drug became manifest. Thus arose the famous infinitesimal dose—not hatched in the fertile imagination of a visionary brain, but insensibly forced upon a man of genius by the irresistible evidence of practical observation. It is true that Hahnemann, in endeavouring to account for the action of the so-called infinitesimals, invested them with wild speculative theories; but these apart, the fact remains that, in a large proportion of diseases where the law of similars is applicable, so-called infinitesimal doses are requisite to effect a cure, while in others it is unnecessary to go beyond more material doses, such as were given by Hahnemann in his earlier experiments. Of this more anon.

True to its traditional instinct, the same which poured vials of wrath on Harvey and Jenner, the medical profes-

sion, on the announcement of the infinitesimal dose, raised fierce opposition against Hahnemann. He was literally persecuted from city to city. Driven from Leipsic, he wandered from place to place, teaching and practising the new method of treatment. The grossest calumnies, the most bitter invectives, were heaped upon his devoted head. He was mobbed and insulted by the populace of several towns. His life became so unbearable that he was obliged for some time to retire from public notice. His doctrines, however, began to gain ground. Little by little, the truth of his system commended itself to honest minds, and the practical experience of its effects told at last upon the public. Several noblemen and medical men were cured by him, who had been given up by the adherents of the old system, and these became strenuous advocates of Homœopathy. Crowds soon flocked to him for relief, and people who were once ready to stone him now received him with acclamations. Hahnemann ultimately removed to Paris, where he died in 1843, at the age of 88. He lived to see his doctrines obtain a firm hold in all the civilised nations of the world. He had the satisfaction of seeing them embraced and practiced by thousands of medical men in almost every country. The system, inaugurated amid the fiercest storms, had become in the course of fifty years, and in spite of the most inveterate professional opposition, an established fact. So much had it to endure, that, had it been an ephemeral, unfounded theory, instead of truth, it could not have withstood the trial.

Since the death of Hahnemann, Homœopathy has spread far and wide. The theories and wild speculations of its founder have been cast aside, and most of the dross, of which there was a great deal, has been swept away. Being a science only in its infancy, it was not to be expected that it should spring forth fully developed; on the contrary, it had originally, as in some quarters it has yet, much that was erroneous and extravagant. But in propor-

tion as the number of its scientific and learned adherents increased, so its errors and speculations gradually diminished. It is still far from being a perfect science, but it is one of progress; and now that the true path seems to have been discovered, we may hope for a steady advance in therapeutics.

The evidence in favour of the truth, and immense superiority of Homœopathy over all other methods of treatment, is overwhelming. It is scarcely possible to conceive a conscientious mind shutting itself up against conviction after candid examination. The ingenious devices which are manufactured for the purpose of getting over plain incontrovertible facts, only prove that the opponents of Homœopathy are conscious of their own weakness. Their arguments are so feeble, so childish, so utterly devoid of point that one feels ashamed to think that they are advanced by men who enjoy high public reputation, and who are otherwise learned and sensible. The evidence which I shall now bring forward, partial as it is, should convince every unprejudiced mind, as far as it is possible to do so without personal investigation, that Homœopathy demands a most careful examination, to neglect which is a crime against humanity. We may arrange the proofs under three heads:—

1. ITS PREVALENCE.

2. ITS STATISTICS.

3. THE TESTIMONY OF ITS OPPONENTS.

1. *Its prevalence.* If Homœopathy were a delusion, how could it possibly have spread as it has done, openly, and in spite of the most virulent professional opposition? There is scarcely a country in the world where it is not represented by large numbers of intelligent, fully educated medical men, and accepted by a greater or less proportion

of the people. No false system of science has ever attained, and I may go so far as to say, that no false system can ever attain such a recognition as Homœopathy has done. True, there have been wide-spread scientific errors, but these have fast disappeared when brought face to face with the truth. Error spreads without, truth in spite of opposition. The old system of medicine with its drugs and heroic measures is fast fading away before Homœopathy. *Contraria contrariis curantur*, it is becoming subservient to *similia similibus curantur*. It is a remarkable fact that Allopathic druggists are obliged to dispense Homœopathic medicines, so great is the demand for them. I am credibly informed that the best customers of a metropolitan Homœopathic chemist are the Allopathic druggists. And, let it be observed, the extensive prevalence of Homœopathy is not so much among the uneducated classes, as among the enlightened nobility and educated middle classes of the country. There are Homœopathic physicians attached to more than one royal court. Thousands of medical men throughout the world practise it. It has its hospitals and colleges, its journals, its pharmacies. The number of its adherents, medical and lay, increases every day. The following are a few facts :—

There are three Homœopathic Hospitals in Vienna under Government inspection, one containing 230 beds ; and five similar institutions in various parts of the Austrian dominions. In Hungary Homœopathy is about to be made a public and obligatory study in the Pesth University.

The editors of the Allopathic Medical Journals in France have determined to admit letters from Homœopaths, and have reported the proceedings of Homœopathic societies. One of the Professors of the Medical School at Montpellier had taught Homœopathy in his lectures, until the Minister of Public Instruction, instigated by hostile parties, prohibited him from introducing the subject in his lectures. But so far were the other medical professors in the same

school from joining in this outcry, that one of them (Professor Lordat) wrote as follows—"I neither admit nor deny the truth of Homœopathy, as I am not sufficiently acquainted with it, not having had time to study it. I shall suspend my opinion of it until I am in a position to have an opinion—that is to say, until I have examined thoroughly into it." Other professors spoke even more strongly in the same direction.

In the Charter of the University of Michigan, provision is made for the establishment of a Professorship of "the Theory and Practice of Homœopathy." The clause is thus worded:—"There shall always be at least one Professor of Homœopathy in the department of Medicine." Until quite recently the Regents of the University have contrived, under one pretext or another, to evade the carrying out of this provision, but have at length been compelled, by the efforts of the friends of Homœopathy, to perform their duty; and Dr. Charles Hempel, of Grand Rapids, has been appointed to the chair, and 3000 dollars, annually, have been voted for its support. Immediately on this appointment being made, three of the Allopathic professors sent in their resignations. An attempt at a compromise was made, by arranging that the Homœopathic professor should not lecture at the University seat, but at Detroit, forty miles distant; but, on an appeal to the Supreme Court of Michigan, the Judges decided that, in order to comply with the law, the Homœopathic chair must be in the same place with the other medical professorships, and failure in compliance with the law would forfeit the large pecuniary assistance which the University receives from the State.

The Canadian Parliament has passed a Bill legalizing the teaching of the principles and practice of Homœopathy, and conferring the power of granting Homœopathic degrees upon the Montreal Homœopathic Association.

From the *Bengalee*, it appears that a Homœopathic Hospital has been established at Benares, and the *Bengalee*

gives as the reason, "that during the late epidemic of cholera, Allopathy stood powerless and aghast, while Homœopathy grappled with the disease successfully;" and as the result, the Judge of Benares, Mr. Ironside, Rajah Deonarain Singh, and a host of the English and native aristocracy, became convinced of the truth of the new system of medicine, and, as a thank-offering for the benefits derived during the pestilence, subscribed an ample fund to establish a permanent Homœopathic Hospital in the city. The *Indian Daily News* states that a Dispensary has been opened in the Chitpore Road, and adds, that "Homœopathy is said to be making great progress in India, and the opening of this new, though second, Dispensary, appears to confirm this. A medical journal devoted to Homœopathy has been established at Calcutta, bearing the title of the *Calcutta Journal of Medicine*, whose editor is Mohendro Loll Sircar. Synd Ahmad Bahadoor, while lecturing at Benares on Homœopathy, stated the following curious fact—if it be one—that in the Hindoo Shastras, the principle of Homœopathy, as now laid down, is extant, and has been from time immemorial; that among the Arabs also the principle is admitted; and that Hahnemann only brought the system to maturity, by a uniform observance of the rule.

A dispensary has been recently established in Adelaide, under the management of Drs. Wheeler and Campbell, the latter late house surgeon of the London Homœopathic Hospital. The *Melbourne Argus* of Jan. 11, 1868, announces the appointment of Dr. Braithwaite, a Homœopathic Physician, to the General Hospital of Castlemaine.

A paragraph appeared in the *Lancet*, announcing that the practice of Homœopathy had been forbidden under heavy penalties in consequence of the numerous deaths. For this *canard* there was no foundation whatever (as that periodical was afterwards obliged to admit); but to certain Allopathic journals it seemed a choice morsel, and one practitioner even paid for its insertion in a Scarborough paper as an

advertisement. The true news from Russia is, that Homœopathy is rapidly spreading, and the Emperor has given permission to the St. Petersburg medical men to form a society. Thus, instead of being an exploded theory or cast-off system, as some would represent it, Homœopathy (readjusted and improved in some details, from experience) has been of late rapidly advancing in public favour in various countries, and in our own among others, although in Britain hitherto kept back by a combination of prejudiced practitioners of the old system.

In the presence of facts like these, the charge of quackery and imposture is perfectly groundless. Those who make it are guilty either of gross ignorance or wilful blindness. To an unprejudiced inquirer the extensive adoption of Homœopathy affords *primâ facie* evidence of its truth.

2. *Its statistics.* The following abstracts are taken from Dr. Sharp's "Essays on Homœopathy," and have been collected mostly from a work by Dr. Routh, entitled "The Fallacies of Homœopathy."* In 1836 Vienna was visited by cholera. Under Allopathic treatment two-thirds of the cases died, while of those treated in the Homœopathic Hospital (under the inspection of two Allopathic physicians), two-thirds recovered. The per-centage in each case was this:—

Mortality in Allopathic Hospital, . . .	66 per cent.
Mortality in Homœopathic Hospital, . . .	33 „

During the cholera epidemic in Edinburgh in 1849, 817 cases were treated, of whom only 271 recovered, 546 having died. The number of cases treated Homœopathically was 236, of whom 179 recovered, the deaths being only 57. The mortality under Allopathic treatment was 66 per cent., under the Homœopathic only 25 per cent.

* I must not omit to recommend the perusal of Dr Sharp's most able treatises. The whole subject is discussed in a manner, which, while it divests Homœopathy of all that is unsound, places the truth before the reader in a most convincing manner.

Similar disproportionate mortality was observed in Liverpool, Newcastle, and other places where the contrast was made.

In Ireland during the epidemic fever of 1847, the following results were obtained:—

Mortality from fever under ordinary treatment, with Hospital advantages, . . .	13 per cent.
Mortality from fever, with no treatment at all, except Hospital advantages, . . .	10 „
Mortality from fever under Homœopathic treatment at home in the midst of filth, &c.,	less than 2 „
Mortality from dysentery during Irish famine under ordinary treatment, . . .	36 „
Mortality from dysentery under Homœopathic treatment,	14 „

It was this striking contrast in the Irish epidemic that brought Homœopathy into general notice in this country. For twenty years before that time, however, it had been making steady progress through the exertions of Dr. Quin, who first introduced it.

The statistics of Dr. Fleischmann's Homœopathic Hospital in Vienna are universally admitted to be genuine. They have been rigorously tested by friends and foes, and declared to be accurate. The following numbers are taken by Dr. Sharp from Dr. Routh's book, which, be it remembered, is written against Homœopathy, and only succeeds in establishing its truth.

CASES TREATED IN VIENNA.

Pneumonia (Inflammation of Lungs.)

	Admitted.	Died.	Mortality
			p. c.
Allopathic Hospital,.....	1134	260	23
Homœopathic Hospital,.....	538	28	5

Pleurisy

	Admitted.	Died.	Mortality.
			p. c.
Allopathic Hospital,.....	1017	134	13
Homœopathic Hospital,.....	386	12	3

Peritonitis.

	Admitted.		Died.		Mortality. p. c.
Allopathic Hospital,.....	628	...	84	...	13
Homœopathic Hospital,.....	184	...	8	...	4

Dysentery.

	Admitted.		Died.		Mortality. p. c.
Allopathic Hospital,.....	162	...	37	...	22
Homœopathic Hospital,.....	175	...	6	...	3

Fever, excluding Typhus.

	Admitted.		Died.		Mortality. p. c.
Allopathic Hospital,.....	9697	...	931	...	9
Homœopathic Hospital,.....	3062	...	84	...	2

Typhus.

	Admitted.		Died.		Mortality. p. c.
Allopathic Hospital,.....	9371	...	1509	...	16
Homœopathic Hospital,.....	1423	...	219	...	14

In the case of typhus, Homœopathy has not yet discovered remedies which influence it as they do other diseases; hence the difference of mortality is not so marked.

Dr. Routh also collects statistics from the Hospitals of various large towns, and thus gives the aggregate results:—

	Admitted.		Died.		Mortality. p. c.
Allopathic Hospitals, grand total,	119,630	...	11,791	...	10·5
Homœopathic Hospitals, grand total,	32,655	...	1,365	...	4·4

The Vienna statistics are undoubtedly genuine. As Dr. Sharp says—"The very existence of a Homœopathic Hospital in Vienna is itself a convincing proof of the superior value of the new treatment. It was because Dr. Fleischmann, when the Asiatic cholera raged in Vienna, cured double the number that were saved under the old system, that the Emperor removed the restrictions that had previously been imposed upon the practice of Homœopathy in his dominions, and established the Hospital, which has since been the principal School of Homœopathy for Europe."

At the close of the cholera epidemic of 1853-54, in this country, the Government returns showed that two-thirds of the cases had died under the old treatment, while two-thirds had recovered who were treated Homœopathically, thus confirming the experience of Vienna practitioners.

The following statistics are given in the Transactions of the New-York Homœopathic Medical Society for 1866, vol. 4.

The Hospital at Gyongyos in Hungary, was alternately under Allopathic and Homœopathic treatment, having five years of the former, and eleven of the latter. The results were as follows —

Under Allopathy,	.	.	622 cases,	.	.	98 deaths.
Mortality,	.	.	15·7 per cent.			
Under Homœopathy,	.	.	1538 cases,	.	.	143 deaths.
Mortality	.	.	9·3 per cent.			

The Convent of Refuge at Marseilles was likewise under both systems for a period. The average mortality under Allopathy was 5·5 per cent., and under Homœopathy 2·9 per cent.

Tessier's statistics in Paris give the following results :—

Allopathic Wards.

In 1849	...	1087 cases,	...	169 deaths	...	mortality,	14·71 p. c.
1850	...	1195	„	107	„	„	8·99 „
1851	...	1442	„	135	„	„	9·36 „

Homœopathic Wards.

In 1849	...	1292 cases,	...	126 deaths	...	mortality,	9·75 p. c.
1850	...	1677	„	138	„	„	8·22 „
1851	...	1694	„	135	„	„	7·96 „

Total for three years :—

Allopathic,	.	.	3724 cases.	.	.	mortality	11·3 p. c.
Homœopathic,	.	.	4663 cases.	.	.	mortality	8·55 p. c.

The average mortality in the London Homœopathic Hospital for 1866 was 5 per cent, while in some of the

Allopathic Hospitals it rose so high as from 15 to 17 per cent.

The mortality from yellow fever under ordinary treatment has ranged from 27 to 77 per cent., according to the nature of the epidemic. In 1853, Drs. Holcombe and Davis treated the disease Homœopathically, with a mortality of only six per cent. For this result they were placed in charge of the Mississippi State Hospital, in 1854. During 1854-5, they had in this Hospital 461 cases of yellow fever, with 22 deaths, or less than 5 per cent. At Rio the mortality from yellow fever under Homœopathic treatment in 1851-2, was only six per cent. Most official statistics return the average of six per cent. as the usual mortality from yellow fever under the new system.

During 1864, the Military Hospitals in St. Louis, U.S., were placed respectively under the care of an Allopathic and a Homœopathic physician. The statistics at the end of six months are as follows, with the observations of the American Homœopathic Observer :—*

Homœopathic Hospital.

	Cases.		Cured.		Died.		Remaining in Hospital.
Typhoid Fever,	39	...	35	...	2	...	2
Pneumonia,	13	...	13	...	0	...	0
Diarrhœa,.....	95	...	92	...	0	...	3
Dysentery,	32	...	27	...	0	...	5
Other Diseases,	654	...	646	...	3	...	5
Total,	833	...	813	...	5	...	15

Allopathic Hospital.

	Cases.		Cured.		Died.		Remaining in Hospital.
Typhoid Fever,	10	...	2	..	7	...	1
Pneumonia,	23	...	10	...	12	...	1
Diarrhœa,.....	106	...	71	...	23	...	12
Dysentery,	30	...	7	...	21	...	2
Other Diseases,	821	...	641	...	57	...	123
Total,	990	...	731	...	120	...	139

* *Monthly Hom. Review*, 1868.

“In the first four diseases, in the Allopathic Hospital, the mortality is 37·2 per cent. In the same four diseases, in the Homœopathic Hospital, it is only 1·1 per cent. ! In the Allopathic Hospital, the average mortality for all diseases is 12 per cent. In the Homœopathic Hospital, it is only six-tenths of 1 per cent ? Had the patients in the Allopathic Hospital received the same treatment, and recovered in the same ratio as in the Homœopathic, there would have been only 6 deaths, instead of 120 ; and had the sick who were treated in the Homœopathic Hospital died at the same mortality rates as in the Allopathic, there would have been over 100 deaths, instead of 5 ! How will the reader account for this striking difference ? ”

Had these not been military hospitals under official inspection, such a report might have been received with the allowance often necessary to be made to what comes across the Atlantic. It must be borne in mind also that those incurable cases which form a large item of civil hospital practice are omitted in both instances, the patients being invalided and sent home. Moreover, the patients are soldiers in the prime of life. In another military hospital in the United States, the mortality for four years was only 1·1 per cent.

Such is the progress made in the United States, that the number of Homœopathic practitioners is 3637, of whom New York alone claims 818. There are sixty societies, of which three are national ; seven colleges, granting diplomas ; thirteen hospitals and infirmaries. In addition to the Hahnemannian Life Assurance Society, another (the Atlantic Mutual) has adopted the principle of reduced rates for Homœopaths, and has issued its first report, from which it appears that of the policies issued—1150 in number—76 per cent. were issued at the reduced rates. The Directors of the New York Ophthalmic Hospital have substituted Homœopathy for the Allopathic system of cure. Some three years since, the Michigan State Prison adopted the Homœopathic system in the prison hospital. The comparative results of the three years under each system are shown in the following table :—

	Average No. of Prisoners.	Deaths.	Days of Labour Lost.	Cost of Medicines.
Under Allopathy,	435	... 39	... 23,000	... 1678 dols.
Under Homœopathy, .	544	... 20	... 10,000	... 500 ,,

The Report of the Liverpool Homœopathic Dispensary for 1866 states, that during the epidemic of cholera, 99 cases were treated, of whom only 14 died. In addition there were treated 253 choleraic cases, including English cholera and choleraic diarrhœa, without a single death. Contrast this with Allopathic experience, the fatalities amounting to from one-half to two-thirds. In one town all the patients died but one.

In Devizes there are two Dispensaries, one under the charge of four Allopathic physicians, and the other conducted by one Homœopathist. It appears from the Report of the former, for 1866, that the patients have gradually diminished for some years. Various reasons were assigned by the Committee for the falling away in 1865, but in the succeeding year the still further diminution is passed over without comment. There were 200 patients in 1865, being less than in former years, and only 160 in 1866. On the other hand the number of patients at the Homœopathic Dispensary has been as rapidly increasing, as many as 362 seeking advice during the year 1866. Thus of 522 poor people in Devizes who in that year required medical advice, two-thirds preferred Homœopathic treatment. The only explanation possible is, that, as generally happens in such cases, the destitute working classes (who, by the way, are not apt to think themselves doctored unless they are drugged—the more nauseous the medicine the more effectual)—these classes prefer the mode of treatment which they have found most beneficial.

I need not multiply figures, as it would only be a continual repetition of the same facts, showing Homœopathy to be far superior to other methods of treatment. I might fill pages with them till there was a redundancy of details,

but these ought to suffice for examples. These statistics are so genuine that medical men on the spot have not ventured to assail them, but they take refuge in the allegation that Homœopathy is so successful *because it is no treatment at all*. If this be so, why do they persist in treating their patients by a system which, on their own showing, is so much worse than leaving them alone? It is not true, however, that Homœopathy is a do-nothing system. Statistics have shown, as in the Irish fever, and in the fevers of Vienna, where the comparisons were made, that the expectant or do-nothing treatment is much more fatal than the Homœopathic.

The reason why Homœopathy is dependent so much on foreign statistics is, that in this country, a fair comparison is absolutely refused. The medical profession will not permit a comparative trial of the two systems. The foregoing figures, however, obtained independently of them, will, I think, show, that, in lessening the mortality from remediable disease, Homœopathy is incomparably superior to the old system. How men get over them I do not understand. It is true, no amount of extraneous evidence will produce conviction without personal and unprejudiced trial, but how men can absolutely refuse even to examine Homœopathy in the face of such facts as these, is incomprehensible. But,

3. *Homœopathy has received ample confirmation from the statements of Allopathic physicians themselves, some of them avowedly hostile to it.*

Some pamphlets having been written to call in question the accuracy of Fleischmann's statistics in Vienna, Dr. Inman of Liverpool, Professor of Medicine there, and an opponent of Homœopathy, thus triumphantly refutes the allegation:—"During a late brief residence in Vienna, we satisfied ourselves, on the testimony of Allopathic physicians there, that the published statistics of Fleischmann's Homœopathic Hospital (about which so much more is known, it

would appear, in Edinburgh than in Vienna) are as far above suspicion as most other published Hospital statistics, and as free from sources of fallacy as most data of this kind. The more they are investigated by impartial persons on the spot, the more, we understand, does the belief in their *ordinary veracity* (which is all that can be claimed for common statistics) gain ground; and the flatulent essays and cobbled pamphlets are entitled to little weight, which have been written expressly to persuade the public of the contrary, by those who have not courted the means of obtaining impartial testimony on this subject.”*

Sir John Forbes says, “No careful observer of his actions or candid reader of his (Hahnemann’s) writings can hesitate for a moment to admit that he was a very extraordinary man—one whose name will descend to posterity as the exclusive excogitator and founder of an original system of medicine, as ingenious as many that preceded it, and destined, probably, to be the remote, if not the immediate, cause of more important fundamental changes in the practice of the healing art, than have resulted from any promulgated since the days of Galen himself. Hahnemann was undoubtedly a man of genius and a scholar—a man of indefatigable industry, of undaunted energy, . . . unsurpassed by few in the originality and ingenuity of his views, superior to most in having substantiated and carried out his doctrines into actual and most extensive practice. . . . His apostles and successors were looked upon either as visionaries or quacks, or both. *And yet nothing can be further from the truth.* Whoever examines the Homœopathic doctrines as enounced and expounded in the original writings of Hahnemann, and of many of his followers, must admit, not only that the system is an ingenious one, but that it professes to be based on a most formidable array of facts and experiments, and that these are woven into a complete code of doctrine with singular dexterity and much apparent

* I take this passage from a pamphlet by Dr. G. H. Young, 1858.

fairness. And it is but an act of simple justice to admit, that there exist no grounds for doubting that Hahnemann was as sincere in his belief of the truth of his doctrines as any of the medical systematists who preceded him, and that many at least, among his followers, have been and are sincere, honest, and learned men. That there are charlatans and impostors among the practitioners of Homœopathy cannot be doubted; but, alas! can it be doubted, any more, that there are such, and many such, among the professors of orthodox physic? On these grounds, then, it appears to us reasonable, that the claims of Homœopathy, regarded as a system of medical doctrine, ought to be admitted so far as to entitle it to investigation at least; and, in undertaking such an investigation, we have no more right to reject the evidence supplied in its favour by its professors, than we have of rejecting any other evidence in favour of any other medical doctrine, theoretical or practical.”*

This was written before Hahnemann’s errors and speculations had been abandoned. How much more are Sir John’s sentiments true of Homœopathy as it exists now!†

The next quotation is from a pamphlet by the late Dr. Horner of Hull. It exhibits not only the value of Homœopathy, but the conduct of the profession towards it. Dr. Horner says—“I cannot but regret that I am compelled at the same time to convict the very heads of the profession, in their blind prejudice against Homœopathy, of a conspiracy against truth and against humanity itself. I refer to the last visitation of cholera in London (1854), when the Government, anxious for the future welfare of the community, determined to adopt the surest means of deciding what was

* Loc. cit.

† I have been blamed for keeping back that part of Sir John’s testimony which condemns Homœopathy. It was unnecessary to bring this forward after the distinct statement made immediately before, that Homœopathy was confirmed even by its avowed enemies. Sir John laments the ruin of medicine, but comes to the conclusion that he will remain in the ruins rather than enter a dwelling he has never tested by experience.

really the most efficient treatment of this disease. Hence the establishment of a medical committee of the Board of Health, with the President of the Royal College of Physicians at its head; and also the appointment of a most experienced Medical Inspector of the Cholera Hospitals (Dr. Macloughlin.) By means of printed forms, which were furnished to each Hospital, all the circumstances of each case, its nature and virulence, the treatment adopted, and the effects and results of such treatment were daily registered, and all under the constant supervision of the official Inspector. The accurate statistics thus obtained were, lastly, considered and digested by the Medical Board, and finally reported on to Government. I feel humbled in recording to you that this paid Board,—these heads of the profession to whom Government had confided so important, so sacred a trust—deliberately, designedly suppressed the statistical report of the Homœopathic Cholera Hospital! This report testified that, by the Homœopathic treatment of Asiatic cholera, above two-thirds were cured, while, according to the aggregate statistics of the other Cholera Hospitals, above two-thirds died. In what other language can I truly designate this conduct of the Medical Board, but as a conspiracy against the truth, and against humanity?

“Truth, however, whether the truth be Homœopathy or of any other kind, although often attempted to be thrust deeply into the well, will eventually rise to the surface. Parliament demanded the whole truth; and then appeared to all the vast superiority of the Homœopathic over every other kind of treatment in Asiatic cholera. The Medical Board found refuge in their conduct in the manifesto which I now quote—‘to publish,’ plead they, ‘the returns from Homœopathic practitioners would be to give an unjustifiable sanction to an empirical practice, alike opposed to the maintenance of truth and the progress of science.’”

Yet what was the truth? Not only were the returns as above stated, but the Medical Inspector, Dr. Mac-

loughlin, said, in a letter to one of the Homœopathic physicians—"Your are aware that I went to your Hospital prepossessed against the Homœopathic system ; that you had in me in your camp an enemy rather than a friend. . . . That there may be no misapprehension about the cases I saw in your Hospital, I will add that all I saw were true cases of Asiatic cholera, in the various stages of the disease, and that I saw several cases that did well under Homœopathic treatment, which, I have no hesitation in saying, would have sunk under any other." Besides, he confesses that, although not a Homœopathist by education, principle, or practice, "were it the will of Providence to afflict me with cholera, and to deprive me of the power of prescribing for myself, I would rather be in the hands of a Homœopathic than an Allopathic adviser."

Not less clear and decisive is the testimony of the late celebrated surgeon, Mr. Liston. Having been induced to try the Homœopathic treatment in a few cases, with the candour and honesty characteristic of a great mind, he openly declared his convictions in a lecture to the students. Speaking of the rapid cure of erysipelas, he says—"Of course, we cannot pretend to say positively in what way this effect is produced, but it seems almost to act by magic ; however, so long as we benefit our patients by the treatment we pursue, we have no right to condemn the principles upon which this treatment is recommended and pursued. You know that this medicine (belladonna) is recommended by the Homœopathists in this affection. . . . *I believe in the Homœopathic doctrines to a certain extent*, but I cannot as yet, *from inexperience on the subject*, go the lengths its advocates could wish, in as far as regards the very minute doses of some of their medicines. The medicines in the above cases were certainly given in much smaller doses than have ever hitherto been prescribed. The beneficial effects, as you witnessed, are unquestionable. I have, however, seen similar good effects of the belladonna prepared

according to the Homœopathic pharmacopœia, in a case of very severe erysipelas of the head and face, under the care of my friend, Dr. Quin (a Homœopathist). The inflammatory symptoms and local signs disappeared with very great rapidity. Without adopting the theory of this medical sect, you ought not to reject its doctrines without due examination and inquiry.”* Had Mr. Liston lived, can it be doubted that he would have embraced Homœopathy after such a candid statement? It had been well for them, and for the public, too, had his pupils acted on his most sensible advice. So far from following out the obvious indications from the above cases, Liston’s experience has been almost universally ignored. Our standard writers—Sir Thomas Watson, Aitken, and Reynolds—do not deign even to notice it when they speak of the treatment of erysipelas. It cannot be that they are ignorant of it; and the only other conclusion is, that they have, with common consent, tacitly suppressed it, because it was an unanswerable witness for Homœopathy.

The late Dr. Horner of Hull in his pamphlet (appendix) quotes the opinion of some eminent Allopathic physicians relative to Homœopathy. Thus Dr. Combe says—“Let us scout quacks and pretenders as we may, Homœopathy presents too strong a case to warrant us to dismiss it with ridicule and contempt.” “If I were now in practice, I should hold myself bound without further delay to test its truth, by careful and extensive experiment.” Professor Brera, a celebrated Italian physician, says—“Homœopathy is decried by some as useless, and by others as strange; and although it appears to the great majority as ridiculous and extraordinary, it can nevertheless not be denied that it has taken its stand in the scientific world. It has its books, its journals, its chairs, its hospitals, clinical lectures, professors, and most respectable communities to hear and to appreciate. Having attained this rank, it by no means

* *Lancet*, 1835-36, vol. ii., pp., 105-6.

deserves contempt; but, on the contrary, a cool and impartial investigation, like all other systems of modern date." Professor M'Naughton, of New York, says—"Whether Homœopathy be true or not, it is entitled to have its claims fairly investigated. The object of the profession is to ascertain the truth; and if it should turn out that in any diseases the Homœopathic remedies are more efficacious than those known to the ordinary system, they ought unquestionably to be used. It will not do for the members of the profession to wrap themselves in their dignity, and to call the new system absurd without further inquiry. The history of the profession presents many lamentable instances of the obstinacy with which errors have been clung to, and improvements resisted." The French physician, Broussais, wrote thus—"Many distinguished persons are occupied with it. We cannot reject it without a hearing. We must investigate the truth it contains." He died during his investigation.

Such being the overwhelming testimony in favour of Homœopathy, it might naturally be supposed that the medical profession, in the interests of humanity, would have at this late period thankfully accepted it, and hailed with pleasure the improved method of treatment. It will scarcely be believed, but it is a melancholy fact, that, notwithstanding all this, medical men not only wilfully refuse to adopt it into their practice, but obstinately decline to give it a fair and impartial examination. Worse still, they will not even allow toleration or a fair hearing to its advocates. They have deliberately from foregone conclusion declared that Homœopathy is quackery and irregular practice, and must be treated accordingly. It is impossible to contemplate the conduct and bearing of medical societies and medical men generally towards the adherents of the new system, without a feeling of shame and indignation that an honourable profession should so demean itself. In the domain of medicine the utmost freedom is allowed to

every honestly conceived opinion—*except one*. One may advocate bleeding in various degrees, from the moderate six ounces to the *coup sur coup* of Bouillaud, until the patient have scarce blood enough left to raise him from his bed ; another may blister from neck to heel ; a third may delight in the actual cautery or hot iron ; a fourth may mercurialise his patients till they are living barometers, and have scarce a sound tooth in their heads ; a fifth may purge till the bad humours are drained from the body, and the patient drained of strength ; a sixth may “pour in” wine and brandy till the patient’s dying delirium be as much alcoholic as morbid ; all these, and many or *any* other opinions are advocated, and received and practised in proportion to the position and eminence of the advocate ; but the opinion that “like cures like,” and that small material or infinitesimal (so-called) doses of medicines will cure disease without bleeding, blistering, purging, mercury, or such like, is received with a howl of execration, and subjects the unhappy offender to excommunication.* To believe in Homœopathy is to endure the penalty of being cast out of the profession for a quack. The trials and privations of those who honestly carried out their convictions read more like romances of the middle ages than like transactions of the nineteenth century. No name is too vile to cast upon them. They are stigmatised as quacks, dishonest, impostors, and what not ? Some one says, “It is impossible to believe in the honesty of a Homœopath.” Their very sanity is called in question. A learned Journal† says—“The man that is inclined to investigate this folly already betrays unsoundness of mind, and we would warn him against experimentation

* This is actual fact, as may be ascertained from the recorded proceedings of Medical Societies towards those who, without avowing Homœopathy, expressed favourable sentiments towards it. Last year a case of this kind occurred. A member of a Society was delivering an address, and ventured to remark that he had found benefit from Homœopathic remedies, when he was interrupted by a perfect storm of abuse, and threatened with being turned out of the room if he said a word further.

† Athenæum.

on the subject, which will be almost sure to end in his adopting the delusion." The writer's animus is not only here shown, but he affords a striking proof of the truth of Homœopathy by admitting that trial of it is almost sure to end in conviction. The name of Homœopath is associated in the mind with the name of the lowest charlatan. When a medical man avowed his convictions, he was instantly forsaken by his former friends. All communication with him was suspended. Wherever he went, he received the cold shoulder. Behind his back, and sometimes to his face, his brethren loaded him with abuse. They refused to regard him as a member of the profession. They compelled him to resign his public appointments, whether Parochial, Dispensary, or Hospital. They declined to meet him in consultation, or to assist him in a difficulty. If a surgical opinion or a surgical operation were desired, the Surgeon declined the case unless the Homœopath were dismissed. Two eminent London Surgeons, some years ago, having met with Homœopathic physicians for purely surgical business, received such a storm of abuse from the medical journals and the profession that, after a "feeble defence," they apologised, and promised not to do so again. Such is the bitterness of opposition, that men dare not hold interviews with Homœopaths, except clandestinely. Medical societies have adopted resolutions declaring the belief in Homœopathy inconsistent with membership. One of the latest examples is that of the British Medical Association, which embraces the most influential portion of the profession in this country. This enlightened body, in its rules, declares it to be incompatible with membership—

1. To believe in Homœopathy; 2. Or to consult with one who believes in Homœopathy; 3. Or to consult with one who has consulted with a Homœopath.

Not content with this, the profession carries its enmity even into the press. The medical journals are wholly exclusive. Nothing can find a place in them which favours Homœopathy. In spite

of the numberless attempts to gain a fair hearing through the so-called independent medical press, to this hour all the journals are closed against Homœopathic opinions.* No editor dares to admit anything from the new system. Homœopathy is thus driven to its own journals for the dissemination of its principles, and for the cultivation of that free spirit of inquiry which is denied to it elsewhere. Allopaths seldom read these journals, and, consequently, by their own wilful act, they have deprived themselves of one branch of scientific pursuit, and have become as ignorant of Homœopathy as the child unborn. And it ought to be remembered that this state of matters does not belong to a dark age long past, but is in actual existence in the year of grace one thousand eight hundred and sixty-eight. All that has happened before will happen again, should the occasion arise. If any medical man were to avow his honest conviction that Homœopathy was true, the same tragedy which I have described would be enacted over again. It would be useless for him to declare his honesty of purpose, his careful, unprejudiced investigation, his conscientious conviction; his brethren would clamour for his expulsion, *and it would not be their fault if they did not succeed*. Patients may die in a regular way, but they must not be cured irregularly. If this be not trades-unionism, what is?

The crowning sin of the medical profession in this matter is the absolute refusal to look into the subject. They will not make a single experiment. They may have read a few books, but the practical test has never been applied. Their notions of Homœopathy are those of total misconception and ignorance. They believe it to be one thing, while it is perhaps the opposite. In these circumstances, how intelligent men should set themselves in determined, wilful opposition to a system which they have

* A little relaxation has lately taken place. The *Medical Mirror*, I believe, opens its columns to Homœopaths.

never tried nor candidly investigated, is beyond comprehension. It brings us back to the days of Galileo, when all the learned of the time argued to their own satisfaction against the great astronomer's statements, *but would not look through the telescope*. Those who simply looked were convinced; as are those who examine Homœopathy. *For it is a remarkable fact that all those who have honestly investigated the subject have adopted the new system, many of them taking it up for the purpose of writing against it. And conversely, I have never heard of, nor does it appear that Allopathists can bring forward a true reliable instance of any one who, after adopting Homœopathy, has honestly abandoned it.** Sir James Simpson and others have written against Homœopathy; but in spite of the weight of their names, their statements are worthless, for two reasons—first, Because they are based on a misunderstanding of the subject they write of; and, secondly, Because they never put the doctrines they condemn to a practical test.

To do the medical profession justice, there is some excuse for their opposition—an excuse which has by no means received from Homœopaths the attention it deserves. There are various reasons which unquestionably give some colour to the attitude adopted towards Homœopathy by medical men. These reasons may be arranged under three heads.

1. There is, undoubtedly, a great deal of nonsense in Homœopathic writings. Even Hahnemann himself has written much to repel an inquiring mind. There is a body called the pure Hahnemannian school, the tenets of which are certainly repugnant to every rational feeling. With this school no sympathy can be had. I believe that to it much of the opposition of medical men to Homœopathy is due, because they judge of the whole system by the doc-

* Two or three instances have been brought forward, but the circumstances are not stated. One of them, at all events, gave up Homœopathy in order to gain an appointment. This is not an honest abandonment.

trines of this small and extravagant sect. Still, the errors of Hahnemann, and particularly of his followers, do not warrant a wilful rejection of the truth which is enveloped under them. To carry out this principle would compel us to dispense with medical literature altogether; for how much rubbish appears weekly in the orthodox medical journals! Volume after volume might be thrown aside as worthless, were it not that the hope of finding a little gold secures a careful perusal. So it ought to be with Homœopathy. There is gold, much fine gold, in it, notwithstanding the dross. From a careful perusal of Homœopathic writings, I can testify that the pure, enlightened system of the present day is a very different thing from what its detractors believe.

2. Some of the advocates of Homœopathy, chiefly non-professional, have done much to deter its advance by their extravagant laudations of it. It is not to be wondered at that those, and there are many such, who have been rescued from death's door by Homœopathy should be loud in its praises. It is both natural and proper. But it is as untrue as it is injudicious to hold it up, as many of them do, as an unfailing remedy in all diseases. This is a vital mistake. For not only does it throw ridicule upon the system, but it gives rise to the prevalent impression that its practitioners invariably treat every disease Homœopathically. It cannot be too much insisted on that those who practice Homœopathy are physicians seeking to cure their patients, and not sectarians standing up for a system. They are not committed to one method of treatment more than another. There are many cases in which Homœopathy is quite inapplicable, and they would never think of treating these in accordance with the law of similars. They are no more entitled to the sectarian name of "Homœopath" than are others to those of "Bleeder," "Blisterer," "Purger," or "Mercurialist," because they *sometimes* bleed, *sometimes* blister, or purge, or give mercury. They are physicians endeavouring

to cure or relieve disease by the best means at their command, but believing that Homœopathy affords them this means in a certain proportion of cases. Again, Homœopathy will not cure all diseases—not even those which are curable, and certainly not organic disease. Death is a more universal law than Homœopathy. But where a cure can be effected, all that Homœopathy asserts is that, wherever it is applicable, it affords a better chance of recovery than either the drugging or the do-nothing system.

3. The main objection to Homœopathy, however, is the much-abused infinitesimal dose. We hear of putting a drop into one end of a lake, and taking a wine glassful for a dose at the other. Those who speak in this way know very little of what they profess to ridicule. Hahnemann's highest dilution requires only six ounces of spirit, and half an ounce is all that is necessary for the ordinary dilutions in common use. The absurdity of comparing the dose to a drop thrown into the sea is self-evident; no one could employ such a simile who is not totally ignorant of the subject. To prevent misunderstanding, I must here repeat emphatically, *that Homœopathy is a principle, not a dose*; the principal, namely, of selecting for the cure of disease medicines which produce on the healthy body symptoms resembling those of the existing malady. The amount of the dose is entirely a question of experience. All that is contended for is, not that it shall be infinitesimal, but that it shall be less than will produce aggravation of the symptoms. Hahnemann's early cures were made by material doses; and a large proportion of Homœopathic practice is carried on by very substantial quantities of medicine, care only being taken that they fall short of aggravation. Infinitesimalism arose, as I said before, from the observation of Hahnemann that in some cases the symptoms were made worse even by his small material doses, which he accordingly reduced, till he reached the point where aggravation ceased. His theory of dynamisation, or potentisation, has

now been justly abandoned by his followers as untenable, and they mostly agree that there is a point beyond which the infinitesimal dose becomes inert. The opinions of the true enlightened Homœopathic practitioners may be thus summed up:—Some diseases are cured by material doses; others require very minute, so-called infinitesimal doses. The medicines to be selected in accordance with the law of similars; any dose, large or small, may be given, short of aggravating the symptoms: the experience of each case to be the best means of determining the dose.

It is certainly repugnant to all our old ideas, even to common sense itself, to believe that infinitesimals cure. But it was equally repugnant to the senses of the learned *savans* of the middle ages to be told that the earth went round the sun. The question is—Is it fact, or the reverse? We have the universal testimony of thousands of honest medical men to the affirmative. We have the testimony that those who experiment on the subject always believe it. Is such testimony to be rejected as worthless, visionary, imaginative? Then if such evidence is to be disputed, when the practical test is within the reach of all, there is not a physical law in the universe which may not be called in question, experiment being beyond reach, and the facts to be taken only on the testimony of trustworthy observers. Infinitesimal doses do cure, that is certain. How, is uncertain; but the fact remains.

Infinitesimalism, however, is not so extravagant as is commonly supposed. The recent revelations of the spectrum analysis show that it is quite easy to take cognisance of particles of matter divided infinitely smaller than the Homœopathic infinitesimal dose. Chemical tests can detect the presence of medicines in the most dilute solutions. A grain of musk will perfume a room for a long time, without losing weight. Fever poisons abound among us; we know them too well by their deadly effects; yet the aggregation of their particles in a concentrated form

has as yet defied all microscopical or chemical detection. What an infinitesimal particle must that be which spreads fever from one to another! Its dire effects are seen, but of itself not a trace exists. The vaccine matter, the snake poison, the virus of rabies, all consist of infinitesimal particles suspended in a fluid, forming solutions which may be compared to the high Homœopathic dilutions, but so infinitely divided as to elude all detection: who does not know the effects of the least perceptible particle of those fluids? The smell even of ipecacuan produces in some individuals a violent paroxysm of hay-asthma; so much so sometimes that it is enough to bring on the disease to go simply into a shop or room where the drug is lying. It must be an infinitesimal particle which causes such an effect. The various perfumes, odours, &c., good and bad, consist of particles which produce each a different impression on the nerves of smell, proving each to have an individuality of its own. These particles have not been detected; they are infinitesimal. Dr. Guy says, "By any of these three methods satisfactory results should be obtained with the $\frac{1}{1000000}$ th of a grain of metallic arsenic, and in skilful and practised hands, with the $\frac{1}{1000000}$ th of a grain. . . . As it is very important that these and similar statements respecting the detection of minute quantities of arsenic, or of other poisons, should not be discredited, a short digression on the divisibility of matter may be permitted. Some misapprehension certainly exists on this subject in consequence of the bulk of matter represented by a grain being undervalued. The best way to correct this misconception appears to be the counting out of the number of distinct particles of common objects visible by the naked eye. I have caused this to be done in the case of certain small seeds, and have found that the seeds of digitalis number 1126 to the grain, and those of lobelia inflata 3176, while the fern seeds of the shops can be counted to the number of 50,900 to the grain. When, therefore, we speak of the ready identification of the

thousandth of a grain of arsenic, and the possible identification of the five-thousandth of a grain, we are still speaking of visible particles. When, again, we speak of metallic crusts obtained by Marsh's apparatus from the half-millionth or millionth of a grain of arsenic, according to Reinsch's method, it is only necessary to revert to the fact that a single grain of gold can be mechanically divided into 490,000 visible pieces, and into the almost incredible number of 4,900,000,000 fragments visible by the microscope."*

Dr. Taylor says, "Marsh's test is undoubtedly one of great delicacy. M.M. Danger and Flandin assert that metallic deposits may be procured when the arsenic forms only the 2,000,000th part of the liquid examined. M. Signoret states that he has procured metallic deposits with only the 200,000,000th part of arsenic in the liquid; this is in the proportion of one grain of arsenic dissolved in about 400,000 ounces, or 3,000 gallons of water!" "There is no doubt that considerably less than the millionth part of a grain of arsenic may, by Marsh's test, be rendered *visible* on a glass plate; it is possible to distinguish with the eye a piece of gold-leaf which would weigh less than the ten-millionth part of a grain." "M. Villain has attempted to determine how many metallic deposits can be obtained from a given weight of arsenious acid. The result at which he arrived is that $\frac{1}{15}$ part of a grain of white arsenic will yield on an average 226 metallic deposits of an average diameter of the $\frac{1}{12}$ of an inch. The average weight of each, therefore, even suppose there were no loss, would be about the $\frac{1}{15000}$ th part of a grain."†

Keeping these facts in view, if medical men would consider the number of cells contained in a given portion, say of the cerebro-spinal axis, a portion having its own special independent function, and though small in itself, yet exercising influence upon a considerable part of the body, such

* *Forensic Medicine*, pp. 386-7.

† *On Poisons*, pp. 396-7.

as the origin of a nerve—if medical men were to reflect on this, and compare it with the statements just made, they would be silent regarding the power of minutely divided medicines. Suppose this little portion of nervous matter to contain 1000 cells in a morbid condition—a condition manifested by disturbance of the parts or organs over which it presided—and suppose that a medicine such as arsenic has a special affinity for it, is it beyond comprehension to believe that 1000 particles of arsenic, which may be larger than the cells, and which may represent only a very small fraction of a grain, should have a powerful effect on the morbid part, especially when that part is more susceptible than in health? I do not give this as the true explanation of medicinal action, but simply to show that a so-called infinitesimal dose is far from being irrational or incomprehensible.

I might thus go on multiplying analogous instances of the power of infinitesimal doses of matter; but the truth is that no analogy whatever will convince a prejudiced mind of the possibility of the efficacy of infinitesimal doses of drugs in disease, unless he put it to practical trial. The *experimentum crucis* is what will convince, and it lies ready to hand for any one who will honestly take it up. He may rest assured that however repugnant to his common sense so-called, his old ideas, or his prejudices, the infinitesimal dose may be, a fair, candid trial of it will completely change his opinion. The whole difficulty is in getting the mind to suppose the possibility of it; when this is got over, the practical experiment soon follows, with the inevitable result. I may here add the words of the late Dr. John Fletcher of Edinburgh, an eminent Allopathic physician, and by no means a Homœopath—"Even this (the infinitesimal dose) is not so palpably absurd as some persons have chosen to represent it, since we all know that very violent effects frequently result from even a smaller dose (than the octillionth of a drop of tincture) of

musk and other perfumes ; and, upon the whole, Hahnemann's book is an original and interesting one, and displays more reflection in every page than many of his decriers will evince in the whole course of their life and conduct for half a century."

There is some misunderstanding, however, on the subject of the infinitesimal dose, which ought to be removed. Homœopaths now very seldom prescribe what deserves the name of infinitesimal. Their doses are certainly small, but not so outrageously minute as to merit the obloquy cast on them. A good deal depends on the medicine. If it be one which is comparatively harmless, such as bromide of potassium, then it would be useless to give minute doses ; but if it be very powerful, such as strychnia, or corrosive sublimate, the dose must be proportionally small. A thousandth, or even a millionth of a grain of these powerful drugs cannot be considered an infinitesimal dose ; we find in practice that sometimes this even is too strong, while, on the other hand, in some cases such a dose would be too weak. Infinitesimal is quite a relative term, and can only be applied to such doses as Hahnemann latterly recommended, but which have in great measure been abandoned by his followers.

Making due allowance for the effect on the professional mind of the three considerations just stated, their opposition is rather lame at the present day, after the enormous progress and confessed success of Homœopathy. But there is another point to be noted, which, while it is a powerful testimony for Homœopathy, places the conduct of the profession towards it in a most humiliating light. For some years back medical men have systematically borrowed from their opponents, and prescribed some of the very drugs which the Homœopaths have used for many years, and for the very same diseases. A few of these medicines have actually found their way to the shadow of official authority. And all this has been done, and is done continually with-

out the smallest acknowledgment. Every now and then some one professes to have discovered a cure for some morbid condition, for which he expects credit, *and gets it too*; but behind the scene, to those who know better, the mine whence he dug his treasure is found to be Homœopathy, his new discovery being as old as Hahnemann, and in daily use long before by the despised sectarians. It is quite possible that all this is done unwittingly, some of it doubtless so, but suspicion, grave suspicion, rests on the whole. Some medicines, such as arnica and nuxvomica, were long known as exclusively Homœopathic, and the adoption of them by Allopaths cannot have been done without that knowledge; but there is no acknowledgment. There can be but one opinion of such conduct. However, Homœopaths need not complain. Their object should be the progress of truth, not of a sect. When they see the profession drifting inevitably towards their long-abused doctrines, it should afford them the greatest satisfaction. Step by step the old school advances towards the new; every new fact brought to light is a fresh argument for the law of similars; the literature of the leading men is fast becoming more and more Homœopathic, and in a few years old physic will doubtless be in its grave, or quietly slumbering on the shelves of antiquarian libraries, a monument alike of the credulity and intolerance of men. Indeed, already the writings of one or two of the most respected men of the day contain so much pure Homœopathy, that their known character alone saves them from the charge of copying from Hahnemann.* The whole difference between some of the leading Allopaths and the Homœopaths, lies in the question of dose. The former are at present using comparatively large doses, on the principle of *similia simili-*

*It has recently been discovered that the Homœopathy which abounds in Trousseau's writings, which he denominates "substitution" and for which he and Pidoux get credit, is after all not original; it was obtained from Bretonneau, Trousseau's preceptor, who, in his turn, got it from Hahnemann. See Dr. Brown's Note on this point.

bus curantur; and it is amusing to read of the perplexity in which they confess they are often involved by the injurious effects of those doses. They will doubtless discover, as Hahnemann did, that it is necessary to keep within certain limits, and to reduce their doses.

It is a most remarkable circumstance that the few specific remedies in use by Allopaths, discovered empirically and accidentally, act on the Homœopathic principle. Such remedies as quinine for ague, mercury for syphilis, chlorate of potash for stomatitis, and other medicines, are as true instances of the law of similars as can be well chosen; and those who employ them are unconsciously practising Homœopathy. True, the doses given are not infinitesimal; but I repeat once more, that Homœopathy is a principle, not a dose, and that infinitesimals (so-called) are required only in certain cases, a large proportion of the diseases where the principle is applicable being treated by material doses. When an Allopath gives five grains of the chlorate of potash to cure inflammation of the mouth, he transacts as pure Homœopathy as a follower of Hahnemann does when he gives one millionth of a drop of *nux vomica* for constipation. Yet, although Allopathic works are full of Homœopathic statements, medical men refuse to admit the principle. I had intended here to give a list of medicines which are now, or have been used by Allopaths in accordance with the law of similars; but my friend Dr. Dyce Brown has kindly consented to do this separately, and in a more extended form (*see Appendix*). The amount of Homœopathy which Dr. Brown shows to be contained in Allopathic literature is absolutely overwhelming. How men can have the effrontery, after this, to call Homœopathy “humbug” and a delusion, is more than I can comprehend.

Having thus, in a very cursory manner, endeavoured to define Homœopathy, and to give it its true place in therapeutics, I will now briefly relate the circumstances which led me to adopt it into my practice.

It was not long before I discovered, when a student, that medical men were completely divided on the subject of therapeutics. An esteemed teacher used to spend an hour occasionally in discussing various theories of the action of a particular drug, ending with such words as these—"The fact is, gentlemen, we know nothing at all about the matter." Students naturally adopted the treatment of the teachers they most respected, and put it in practice at the commencement of their professional career. The fear of examiners often made them outwardly assent to opinions which in heart they despised, and which, as soon as they had obtained their degree, were thrown aside. Such was my position when I settled in Aberdeen. I carried into practice those principles which were taught me by the men I had been accustomed to regard with most deference. By degrees, however, I found, as all practitioners have likewise done, that medicine exerted little influence on the progress of disease, and was, moreover, injurious in many cases. I examined the literature of the profession, and found it, to my sorrow, as regards therapeutics, a jumble of conflicting recommendations. In these circumstances I was compelled to give my assent to the opinion which is now fast gaining ground, namely, that disease is best left to nature, and that patients, as a rule, recover best when they are let alone. In this way I went on for years, prescribing only what medicine I felt to be necessary, except when the patient's faith in drugging obliged me to please him by some harmless (?) placebo. Many a time, not only singly, but also in consultation, did the comparative helplessness of our profession force itself upon my mind. I do not wonder that able men sometimes gave up their practice in disgust.

About four years ago, a case died under my care in the Infirmary. The appearances presented at the *post-mortem* examination, compared with the physiological experiments of Claude-Bernard, Brown-Séquard, and others, opened up

to me a train of thought at once new and interesting. For two years I carefully studied the subject, and at last came to the following conclusions:—

1. That medicines have at least two actions on the system, instead of one, as commonly supposed.

2. That, in the majority of diseases, it is the primary action that is curative, and not the secondary.

3. That to obtain this primary action medicines must be given on the very opposite principle on which they are commonly prescribed, and in much smaller doses. The amount of the dose to be determined by experiment.

Assuming that the above-named eminent physiologists are correct in the doctrines they teach (which is universally admitted to be the case, their writings having, in fact, revolutionised pathology), these conclusions are inevitable. They are, indeed, more or less anticipated by some eminent authorities.

Up to this time I was a total stranger to Homœopathy. Although I knew nothing of it, or rather *because* I knew nothing, I was as bitter against it as others. I had never read a Homœopathic book, nor seen a Homœopathic experiment, yet I considered it the wildest delusion. I was not a little startled, therefore, when I was told that the conclusions I had come to were the main principles of Homœopathy; in fact, its very essence. I would not believe it at first; but after reading some of the peculiar writings of that system, I was obliged to confess, to my disappointment, that the ground I was preparing to occupy was already filled, and that the field I proposed to enter had already been well cultivated by Hahnemann and his followers. They had entered it by one way, while I had come from another; that was the whole difference, one, however, in favour of Homœopathy. I thus occupied the singular position of being brought face to face with Homœopathy simply by following out the teaching of some of our most eminent writers, and not by studying the system

itself. This being so, I felt myself bound to investigate the whole subject thoroughly, and not to rest till I had formed an impartial judgment on its merits.

At first I was repelled by the evident nonsense which abounds in some of the earlier Homœopathic works. The real fundamental truths were often buried in wild and speculative theories, and I had difficulty in bringing them to the surface. The more recent writings, and particularly such books as Dr. Sharp's Essays, placed the subject before me in a very different manner. In them Homœopathy is divested of all that is unsound and speculative, and placed before the reader in a most intelligent, and at the same time philosophical manner. I found, then, that the despised and much-abused system was very different indeed from what I had been accustomed to believe, and from what its detractors had declared it to be. Instead of being a visionary thing, the offspring of a wild imagination, I found it a rational and scientific mode of treating disease. So far from being supported by ignorant pretenders, I found ranged under its banner such men as Professor Henderson, Drs. Quin, Sharp, and other men of note. Such a system demanded a most careful experimental examination. Accordingly, after making myself acquainted with the principles of Homœopathy and their mode of application, I determined to test them by practical trial at the bed-side.

For more than two years I have been carefully experimenting, and I must now acknowledge my candid conviction of the great value of this mode of treatment in disease. It seems to me as if a new light had been thrown on medicine, and that, instead of groping in darkness in the vain search for remedies, medical men have now the path clearly before them, if they will only walk in it. I need not enter into the details of my experiments, but a short summary may not be altogether unprofitable. I may say that neither patients or friends knew that my treatment was different from that of others, so that "faith" had nothing to do with the recoveries.

The first case on which I used Homœopathic treatment was one of inflammation of the right lung. The poor fellow had been subjected to all the so-called advantages of the regular system. He had been bled freely, blistered, and purged well. The lung became gangrenous, and a persistent diarrhœa supervened, under which and the discharge from the chest he was rapidly sinking. The medical attendants did the best they could to check the diarrhœa, but in vain, and they at last gave him up. At this juncture I first saw him, and found the case to all appearance so hopeless that I was impatient with his friends for insisting on the possibility of his recovery. It was evident, however, that to check the diarrhœa was the first indication, and as other means had failed, I thought it a good opportunity for testing Homœopathy. To my own surprise, as well as that of the patient and his friends, one or two doses of the medicine I gave completely checked this unfavourable symptom, and from that time the poor fellow gradually recovered, retaining the use of only his left lung, by means of which he has lived since then. He died two months ago, and I have no hesitation in saying that his death is due to the treatment to which he was originally subjected. The successful treatment of this case made a strong impression on my mind.

The next experiment I made was upon myself. For many years I had been the victim of periodical headaches, recurring at variable intervals from a week to a month, and rendering me almost useless for a whole day at a time. I had gone the round of the Pharmacopœia, consulted several physicians, tried every conceivable plan to get rid of this annoyance, without success. At last I tried Homœopathy. When I felt an attack coming on, I took a few drops of a suitable remedy, and to my intense relief the attack was arrested. From that time I have not had a headache, except when I neglected the premonitory symptoms and omitted to take the medicine: it is always sufficient to prevent a paroxysm if I take one or at most two doses of the remedy at the commencement. This was an

argumentum ad hominem which I could not withstand. Several instances of a similar kind have passed under my notice since.

After this I continued my investigations with more expectation of success than before, and the following are a few of the more striking results.

During the autumn of 1866 I met with a number of severe choleraic attacks, some of them not much removed from the Asiatic cholera then prevailing in town. I used Homœopathic treatment with them all, and I am bound to say that, although I had seen many similar cases before, I never saw any recover so rapidly or so effectually as those did which were treated Homœopathically. It is a curious testimony to the Homœopathic tendencies of the old school, that the castor oil treatment of cholera, to which Sir Thomas Watson has recently given his adhesion, is neither more nor less than a rough Homœopathy. The next step will be the adoption of the pure system.

I have had a considerable number of cases of enteric or gastric fever under my care during the last two years. There are few diseases which are more modified and rendered less dangerous by Homœopathy than this. The contrast between the course of the fever under the old system and when treated by the law of similars very speedily forced itself on my notice. I had seen much of this fever under Allopathy: I have now seen it under Homœopathy, and the difference in the result is very great indeed.

Dyspepsia is one of the stumbling-blocks of Allopathy. Yet, when I began to treat such cases Homœopathically, I was often surprised at the almost marvellous celerity with which symptoms of many months' duration disappeared. Obstinate constipation, which for years yielded only to regularly taken laxatives, as pills, castor oil, &c., soon gave way under the simple remedies of the new system. The common functional disorders of the stomach and bowels became much more tractable, and were cured much more frequently and speedily than before.

Those formidable diseases, the inflammatory disorders, afforded a wide field for Homœopathy. I need not say that the new system was tried most extensively in this class of ailments, from the simple cold to the most formidable inflammation. The results were invariably in favour of Homœopathy; indeed Homœopathy did for many of the patients what Allopathy was powerless to do.

I have never found as yet that Homœopathy had any power to arrest the progress of consumption when that disease had fairly been established; but in removing the dyspeptic symptoms which so often precedes the development of tubercle in the lungs, it is certainly invaluable. In relieving and palliating some of the most troublesome accompaniments of confirmed phthisis, it is of signal service.

There are two classes of disease in which it is scarcely possible to over-estimate the value of Homœopathy. I allude to the diseases of females and children. In these I have used it extensively, and I only state the truth when I say that this large portion of suffering humanity have much reason to be thankful to the giver of all good for so simple and effectual a system of treatment as Homœopathy. There are those who "suffer many things of many physicians, and are nothing bettered;" and in some of these I have seen Homœopathy effect more or less good. And for children, when we consider the fearful struggles in the vain efforts to force nauseous drugs into their mouths, and the consequent injury to mind and body, we wonder that parents could have put up with the old system so long, apart from everything else. Homœopathy is in all respects a blessing to the nursery.

Having, then, put the system to so long and constant a test, I must in honour, and from experience of its truth, declare myself a warm supporter of Homœopathy in so far as it is applicable to the treatment of disease. To do otherwise, from a servile fear of consequences, such as loss of caste, &c., would be meanness and cowardice in the

highest degree. But while thus avowing my honest conviction, I must state also that I am not, and never shall be, bound to one system of treatment more than another. The object of physicians is to cure their patients by any means in their power, and not to support special doctrines. While, therefore, I adopt Homœopathy as applicable to a large number of diseases, I still retain all that is good in the old system (much of which is, however, Homœopathic), and in certain cases consider Allopathy to be properly indicated. Homœopathy gives the patient the advantage of what is good in Allopathy, in addition to its own inestimable benefits. It does not ignore the advantages of pure air, regulated diet, change of scene, and the usual hygienic remedies of the old school. It does not consider it inconsistent with its principles to administer wine or brandy for exhaustion, an occasional purgative, an opiate to procure sleep, chloroform in convulsions, ergot, &c., when the nature of the case demands it. I have plainly stated in my published papers that there are frequent instances where the physiological or secondary action of a drug is required instead of the primary; the meaning of which is just this, that Allopathy is required in some cases instead of Homœopathy. The object in a given case is its rapid, effectual cure, or at least, relief of symptoms, and the physician's duty is to further this object by the best means in his power, without reference to Allopathy, Homœopathy, or any other 'pathy. In the present state of medical science, I believe Allopathy suited to some cases, Homœopathy to many more, while there are others which can derive benefit from neither, and ought therefore to be let alone. Such is my creed, and that of my friend Dr. Dyce Brown, the same as that of the most enlightened Homœopathic physicians of the day. For this we must be subjected to "obloquy and reproach" by those who will not take the trouble to investigate what they condemn.

In proof of the total misconception which prevails in

the professional mind regarding Homœopathy, I may state that on the publication of my views, I received several communications from Allopathic medical men agreeing with my conclusions. They said in effect—your views are similar to our own, and are the true explanation of the complexity of drug action. To which I replied—“If you agree with me then you must face Homœopathy, for my views are neither more nor less than a physiological explanation of the law of similars.” “Oh! but,” said they, “*your* Homœopathy is rationable and intelligible, quite different from Hahnemann’s absurd system.” My reply is in effect this—My Homœopathy and Hahnemann’s are identical; I have not given a single opinion, with the exception of the physiological basis, which was not held by Hahnemann long before. You assent to Homœopathy as I present it; you abhor it as Hahnemann presents it—they are both the same *minus* the speculations and absurdities of the latter, which are now exploded. You thus take in six, but reject half-a-dozen. Your ideas of Hahnemann’s system are, therefore, those of misconception and ignorance; for what you now assert your belief in has been the doctrine and practice of Hahnemann and his followers for more than half a century.

Could anything better illustrate the erroneous ideas entertained of Homœopathy by the profession. They have never studied it, yet they seem to know more about it than those who have. They launch out against it the most bitter invectives, they pour on it the grossest abuse, and all the time they are but wasting their energies on a phantom of their own imagination.

To conclude then :—

Homœopathy is a branch of medical science which bears on the treatment of disease.

It administers medicines which cause on the healthy body symptoms resembling those of the existing malady—*similia similibus curantur*—in a dose less than will produce

aggravation of the symptoms. It is neither a system of globules nor of infinitesimal doses. *I never prescribe globules*, nor would I think it right to do so. Of the infinitesimal dose I have already spoken.

It is not applicable to every disease, nor has it any influence on organic mischief. It is by far the best means for the treatment of disease which has yet been discovered, and affords a better chance of recovery than the practice of the old school, whether Allopathic drugging or “do-nothing.”

DR. HARVEY ON HOMŒOPATHY.

The following reply to Dr. Harvey's "Four Letters on Homœopathy, with an Appendix, &c," appeared in the local papers.

If Dr. Harvey has no better defence of Allopathy than what is contained in the four Letters and the Appendix, I think he would have been wise had he refrained from entering on the controversy. I believe that most people will agree with me that he had better have remained silent than attempt to discuss a subject which he evidently has not studied. I feel, therefore, that there is little difficulty in replying to his statements. Some of these are so unworthy of notice that I shall avoid allusion to them, but others require some attention.

1. Dr. Harvey says, "Let us have a stand-up fight, Dr. Reith ; but let there be fair play on both sides." Now, I appeal to all who know the controversy from the beginning, if this be not the very thing I have desired from the first. Did not my colleagues twice resolutely "decline all controversy" with me? Did they not refuse point-blank to answer the two questions I put to them? In spite of every effort to obtain a hearing, did they not close their ears to all my appeals, and warn me to abstain from Homœopathy under pain of being dragged before the Managers? I repeat that what my colleagues did was an attempt to stamp out an alleged heresy without giving its advocate even a hearing. Yet Dr. Harvey demands fair play! I have not denied this to him, but he has plainly refused it to me. I challenge him once more, as I did at first, to what he calls a fair stand-up fight; I promise him fair play; and more, I promise him that respect and deference which is due from a younger to an older and more experienced man. Will he accept the challenge? Let him speak for himself. In the very preface in which he demands a fight, he declares that his pamphlet is his first and last decisive battle, and that if challenged by me, he will fight no more. Am I to understand, then, that the four Letters and their Appendix have exhausted his ammunition in defence of Allopathy, and that he has now no alternative but to die or surrender at discretion?

2. Dr. Harvey alleges that I call the combined wisdom of the profession folly, and the accumulated experience of three thousand years rubbish. He ought to understand that I never did any such thing. I admit, as I have always done, that enormous advances have been made in almost every branch of medical science; but with regard to therapeutics, or the science of treating disease, the accumulated experience of ages

only teaches the profession what its leaders continually proclaim, how very far medical men are from a true knowledge of medicines, and their application to disease. I had no intention of maligning the profession. I merely showed by unanswerable proofs that there was immense room for improvement in therapeutics, that the accumulated facts of ages were all scattered and disjointed for want of a definite principle to generalise them. I said this, not on my own authority, but on that of the foremost men of the day, and if there be anything libellous in it, then the heads of the profession are the convicted parties.

3. I am surprised at the extent to which Dr. Harvey, in his pamphlet, introduces the ecclesiastical element, by comparing my position in the profession to that of a Socinian, a Ritualist, or a Roman Catholic in the "true Church." It is certainly a novel conception, in the nineteenth century, to bring ecclesiastical laws to bear upon the freedom of scientific inquiry. I have always understood that revelation gave us a perfect system of religious doctrine, to depart from which must of necessity be heresy, inasmuch as it is a departure from the Divine, not the human. But so long as science remains unrevealed from heaven, and is left to the investigations of men of finite understanding, so long will there be room for the discovery of new truths, the exploding of old errors, and the variation of opinion. Dr. Harvey forgets that it is contrary to all philosophy to have a creed in science, that both he and his brethren are continually warning their pupils against subscribing to any such thing. Dr. Harvey should reflect that perhaps the "Deceiver of Mankind"* may have had a little to do with the confusion which has reigned in therapeutics for three thousand years, and is, perhaps, the cause of the prejudice existing in the professional mind towards what he knows to be a boon to suffering humanity. He should also pause, and reflect whether he and his brethren are not now in the position of the Scribes and Pharisees, when certain humble disciples of a despised man filled Jerusalem with their doctrines. It would have been well for the profession in Aberdeen had there been a Gamaliel among them,†

4. Dr. Harvey has no hesitation in declaring that I am "bamboozling" the Managers of the Infirmary and the public, "playing a trick" upon them. This is quite consistent with the alleged origin of Homœopathy, but I daresay the Managers and the public will be able to take care of themselves.

5. I must thank Dr. Harvey, in the name of Homœopathy, for his

* "It is no law at all, but a fond imagination whispered into Hahnemann's ear by the Deceiver of Mankind."—Harvey's Letters, page 19.

† When some eminent men, in common with Dr. Harvey and others, declare that Homœopathy is to medicine what Mohammedanism or Mormonism is to religion, they assume to themselves the extraordinary position of being to medicine what the Bible is to religion—i.e., infallible. Or, if Dr. Harvey prefers it, the profession is now in the same condition as the Church of Rome at the Reformation—the utmost license being allowed to every species of sin, except infringement of its ritual.

candid admission in pp. 37 and 38 of his pamphlet. I quote it entire :—
 “I have said that statistics are of no value in testing the relative merits of different modes of treating diseases of the *kind* referred to by Dr. Reith. Yet, there are some diseases that would furnish, on the large scale, a fair criterion—such a criterion as we are in quest of. The list would comprise diseases to which this threefold condition should attach, namely, *first*, that they are never *fatal*; *secondly*, that they are *curable*; and *thirdly*, that they are intrinsically *obstinate*. Let the Homœopaths join issue with us on this ground. They have not yet done so. If now they will; and if they shall win the day, curing such diseases in one-third, or in one-half the time that we of the orthodox school can or do, then I, for one, will bend the knee to Hahnemann.” Most cordially do I thank Dr. Harvey for such a statement; for I have now the pleasure of informing him what he would have known had he made himself practically acquainted with Homœopathy, that the Homœopaths have joined issue with him on this very point. We have such cases as Dr. Harvey speaks of, aye, multitudes of them, never fatal, curable, and intrinsically obstinate. It is in these cases that Homœopathy has won its laurels, and by means of its cures of such that it has taken a deep-rooted hold of the public mind, which no amount of medical prejudice or sophism can eradicate. There might possibly be some doubt about acute cases treated Homœopathically; there recovery might be, as it has always been by Allopaths, set down to nature; but in such cases as the chronic indigestions and nervous disorders, there is no room for doubt. Long treated Allopathically in vain, suffering many things of many physicians in vain, they have been and are continually, rapidly and effectually cured by Homœopathy. In proof of this, I refer to the statistics in my pamphlet, to Dr. Harvey’s own figures in his Appendix, to the daily experience of Homœopathic Physicians, and to the testimony of those individuals who are to be met with everywhere, as living witnesses in their own persons, of the truth of Homœopathy. Will Dr. Harvey now fulfil his promise? Will he now bend the knee to Hahnemann? If he doubts what I have now stated, I shall be most happy to join issue with him, as he desires. Let him give me fair play, and withdraw his opposition to my re-election as his colleague, and if he be honest and sincere in his inquiry after truth, I will undertake, sooner or later, so to convince him of Homœopathy, that he will have no hesitation in rendering the promised homage.*

Now, as to the statistics in Dr. Harvey’s Appendix. His figures look formidable enough to the uninitiated mind, but I scarcely think any one accustomed to statistics, will fail to see through the huge fallacy, which is evident enough even at a glance.

* Notwithstanding Dr. Harvey’s professed willingness to test Homœopathy side by side with Allopathy—nay, his challenge that it be so tested—he tells the Managers of the Infirmary that he will resign his office if I am re-elected as his colleague.

1. Dr. Harvey has the boldness to say deliberately, that the Homœopathic statistics are “cooked”—in other words that Homœopathic physicians in all parts of the world, not excepting Aberdeen, are dishonest. He soliloquises upon the immorality of commercial life, and has the coolness to assert that the Homœopathic system is analogous to a fraudulent joint-stock company (limited). On a par with this is the definition of Eclecticism, given by Dr. Keith to the Medical Society at its last meeting—namely, that it meant dishonesty. All the answer that this deserves is, that those who are unconscious of deception are the last to accuse their neighbours. *Honi soit qui mal y pense.*

2. Now, as to the alleged “cooking.” Dr. Harvey chooses to forget that the Vienna statistics given in my pamphlet are not my figures, but are taken from one of the standard works *against* Homœopathy, written by Dr. Routh, and admitted by him to be genuine. Nay, more, they have been so long before the world, and so rigorously tested by friend and foe, *and especially by Allopathic physicians on the spot*, that the solitary exception of one medical student is worthless, inasmuch as his observations may be as fallacious as the statistics themselves are alleged by Dr. Harvey to be. It is well known that cases supposed to be simple uncomplicated pneumonia, or inflammation of the lungs, turn out, at the *post-mortem* examination, to be really tubercular inflammation. They are, therefore, always removed from the one list and placed on the other. Dr. Balfour has thus failed to make good his charge of “cooking,” and he is, moreover, but an infinitesimal particle against the testimony of men in Vienna itself. The fact that there are now *three* Homœopathic hospitals in Vienna, is a sufficient proof that the Austrian Government and people are quite satisfied as to the efficiency of the new system. Further, the same superior results of Homœopathy are observed *in every part of the world where the two systems can be compared, without any attempt at denial*; the favourite allegation of Allopaths being that Homœopathy is so successful because it is no treatment at all; the inference, therefore, being that medical men prefer injuring their patients by drugs to countenancing Homœopathy. Let it further be borne in mind that Dr. Harvey has not ventured to assail the other statistics given in my pamphlet, but supposes that by a fancied demolition of them in one place he has destroyed the whole. Whether he has done so or not, I leave the public to judge.

3. The main point in Dr. Harvey’s Appendix, and to which he seems to attach immense importance, is the number of statistics he brings forward to prove that Allopathy is as often superior as inferior to Homœopathy. His figures are *not* cooked. I went over them all some months ago, and admit them to be true. But Dr. Harvey has evidently and unwittingly, I believe, *cooked the comparisons*. I am surprised to find that, notwithstanding all his fine language about the ordinary fallacies of statistics, he has, in defiance of all statistical rule, brought together

figures and results which ought to have been separated. He compares the results of medical practice between one town and another, between one country and another, and between one period of time and other. Is not medical literature full of the plainest warnings against such a statistical method? Were Dr. Harvey to adopt such a plan in order to prove the value of any kind of treatment, whatever it was, his statistics would be thrown into the "waste basket." He compares Vienna of thirty years ago with the Edinburgh of to-day; Edinburgh and Vienna, and their patients of both sexes, of different years and of all ages and conditions, with the army and navy of different years and their able-bodied men; Aberdeen of 1867 with London of 1866; English hospitals with Continental. Now, Dr. Harvey knows well, as a practical physician of long standing, that acute diseases vary very much in their mortality, not only in different places, but in *the same place at different times*. Indeed, it is one of the arguments constantly thrown in my teeth by my opponents, that the acute diseases I treat Homœopathically now may be less severe than those I treated Allopathically in former years. I find from my note-book that during 1864 the mortality from typhus in my practice was 5 per cent., while in 1865 it was 10 per cent. from a preponderance of bad cases. Such being the case, it is quite against all statistical rule to do as Dr. Harvey has done, and I am astonished that he should have fallen into a mistake of the kind. He evidently considers the comparative figures of the Aberdeen Infirmary and the London Homœopathic Hospital as a triumph to the former. It should be distinctly observed, however, that Aberdeen and London are two very different places, the patients being notoriously of a different class and of a different constitution, and that a comparison between Aberdeen and London in *one* year even, is as fallacious as between any two years either in London or here. But, further, I have the correct figures beside me; and I may state that in my pamphlet I excluded all surgical cases, as having no bearing on the question, *except to give unreliable returns*. Well, then, let us exclude the surgical cases, the mortality of which in an hospital is always far below that of medical cases; in the Aberdeen Infirmary, the deaths in medical cases during 1867 were 10 per cent.; in the London Homœopathic Hospital in 1866 less than 6 per cent., this hospital having a very small proportion of surgical cases. In the same year, in the London Allopathic Hospitals, the mortality in medical cases ranged from 15 to 17 per cent., this being a much fairer comparison than that between Aberdeen and London. What does Dr. Harvey make of this? Are not his comparisons a striking proof of the fallacy of figures, when he has so sandy a foundation as his Appendix upon which to build a condemnation of Homœopathy. But his own figures are against him. Notwithstanding all the more favourable conditions of the Aberdeen Infirmary in situation, condition of patients, &c., and the fact that fever here is generally *less* fatal than in London, even yet the Homœopathic Hospital is more success-

ful than our own, *particularly so in those diseases which Dr. Harvey lays down as a criterion for testing the truth of Homœopathy.* His own tabular arrangement shows that, with the exception of the fevers of variable mortality, it is only in *incurable* cases that the mortality is higher in London than in Aberdeen; a circumstance explained by the fact that few patients remain to die in our Infirmary if they can help it. Even on his own showing, Homœopathy is better than Allopathy, and on what ground, therefore, should it be denied a fair hearing and a practical trial? After bringing forward the most favourable Allopathic statistics he can find, and comparing them with similar Homœopathic statistics, he admits that there is a clear superiority of 1 per cent. (p. 42) in favour of Homœopathy, and says that it is not much to boast of. Not much to boast of! That Homœopathic cures are more numerous, and the saving of life greater, than under Allopathic treatment! You admit this, Doctor, although you say it is not much to boast of. Certainly not very greatly superior to Allopathy; but, surely, it is VICTORY, by your own showing. Yet this is what you designate “practically arrant and mischievous tomfoolery” (p. 8), and which you say you “never will tolerate.” But whether the Doctor will tolerate it or not, there is surely enough in his own admissions to justify my employment of certain medicines in the cure of disease, which is the real question at issue between us, but which, in the heat of controversy, has been carried into other departments. I trust he will not continue to shut his eye against these facts. Statistics, as every one knows, are so much open to fallacy, that accuracy can be obtained only by comparing the results of treatment *of the same disease, in the same place at the same time.* A fair comparison, as I said in my pamphlet, is absolutely refused in this country. Homœopathy is stamped out as if it were a plague. But in other parts of the world, *a fair comparison has been made,* and with the results given in my pamphlet, the greatest and most telling part of which Dr. Harvey has not ventured to assail. If Dr. Harvey can bring forward nothing better than the figures in his Appendix, it must be plain to all candid inquirers that Allopathy has received its death blow, and the Professor must admit that it is slain, himself with it.

4. Lastly, a point to which I beg to call especial attention. *Dr. Harvey has never tried Homœopathy.* In entering the field against it, he has ventured into the enemy’s country, of which it is too plain he knows absolutely nothing. He makes statements to which no person even cursorily acquainted with the subject would venture to give utterance. He seems to know about *apis* as an animal, under the *nom de plume* of *arnica*, but as a medicine, he knows nothing of it, and is determined to know nothing of it. No wonder that he should flounder and be overcome in the contest. I desire to give him the respect due to his years and experience. I would deprecate any want of deference to him in matters in which he should be an authority; but, on the subject of Homœopathy,

of which he knows little theoretically, and nothing practically, I submit that he cannot be regarded in that light. And what I say of Dr. Harvey is true of the medical profession generally. The public regard their opinion, and justly, with deference. But when medical men presume to pronounce on Homœopathy, a system of which they are confessedly ignorant—when they presume to denounce as deceivers or deceived those who, with honest intentions, adopt a conscientious belief, *after practical trial*, then even a reputation for common sense in other things, does not entitle its supposed possessors to be heard on the question.

APPENDIX.

BY

D. DYCE BROWN, M.D., &c.

NOTWITHSTANDING the opposition evinced by the majority of the profession to Homœopathy, and the law of "*similia similibus curantur*," inveighed against by some as false, and laughed at by others as absurd, numerous passages can be adduced from their best physicians and writers, showing to what a large extent the law of "*similia*," &c. is made use of in practice, and that many of what are reckoned the most reliable and satisfactory medicines can be shown to act in accordance with this law. This seems to me, and must seem, I fancy, to any unprejudiced mind, a most powerful argument in its favour, and one which is not easily set aside. That the writings of first-class "Allopaths" abound in such pieces of practical Homœopathy is either not generally known, or else the fact is kept in the background as inconvenient. But to show that such is the fact, I have collated the following statements and extracts, which speak for themselves. Every statement here given is verified by a reference to the authority quoted; and those passages in inverted commas are quoted in the words of the author. The only exception to this is, when the fact stated is so universally known as to render citation of authorities quite unnecessary. Many of the quotations are translated from the French of M. M. Trousseau and Pidoux, whose names are household words in medicine, and whose work on *Materia Medica* and *Therapeutics* is the most complete and learned work on this subject yet published. It may be mentioned here that these authors explain the use of remedies acting homœopathically on the principle of what they call "*medication substitutive*."* This

* See Note at end of Appendix.

is merely a rough Homœopathy, as the homœopathically acting remedy is given in a dose which will *at first* aggravate the symptoms, thus producing an artificial or “substitutive” disease, which afterwards subsides, and at the same time cures the original complaint. Homœopathic practice, on the other hand, chooses the same remedy, but gives it a dose *less* than will aggravate the symptoms, and thus cures the patient without any primary increase of the symptoms. The physiological action of each remedy (that is, the effects produced on the healthy-body by large doses), and the corresponding therapeutical or medicinal action, are placed in parallel columns, in order that their reverse effects may be seen at a glance. Words here printed in italics are not to be understood as italicised by the authors quoted, unless when it is expressly so stated. They are merely so printed in order more easily to catch the eye of the reader. To these quotations it may be objected that the medicines have been given in “tangible” doses, which are larger than the usual doses given by Homœopaths; to which I reply, that provided the dose be *less than will aggravate the symptoms*, by producing its physiological action, it is a mere question of experience how much less is the proper dose. For example, if five grains of a substance is sufficient to produce its physiological action, and if one grain is found not to do so, but to cure similar symptoms, it is equally Homœopathic to use one grain, $\frac{1}{4}$ of a grain, $\frac{1}{20}$, $\frac{1}{30}$, or $\frac{1}{1000}$ of a grain. The only question in practice is, which dose cures best and quickest, without any chance of aggravating the symptoms; and if $\frac{1}{1000}$ of a grain will cure *equally well* with one grain, it is surely best and safest to use it.

For facility of reference, I may state that the editions of the works referred to are—

Trousseau and Pidoux' *Traité de Therapeutique*, &c. 7th edition. 1862.

Pereira's *Materia Medica*. 3rd edition. 1853.

Wood's *Materia Medica*. Philadelphia. 1856.

Waring's *Manual of Therapeutics*. 2nd edition.

Christison on Poisons. 4th edition. 1845.

Taylor Do 2nd edition. 1859.

Graves's *Clinical Lectures*. Neligan's edition.

1. ACID SULPHURIC.

It is usually believed that sulphuric acid causes constipation ; but Dr. Taylor (on Poisons, p. 256) gives a case where there was purging, at first of blood, afterwards without. Pereira (Mat. Med., p. 358) says, "bowels variously affected, sometimes constipated, though usually purged, the stools being bloody." Dr. Wood (Mat. Med., vol. i. p. 358) says, "If given too freely it produces uneasiness in the stomach, disturbance of digestion, griping pains in the bowels, and often purging ; and the same effects may result from its too long continuance in proper medicinal doses." "After the use of the acid for a few days, especially if it be given in full doses, patients frequently complain of abdominal pain and griping. If its use be persevered in, these effects augment ; heat, pain in the throat and stomach are experienced, the digestive functions are disturbed, and sometimes purging, with febrile symptoms, occurs" (Pereira, p. 358, op. cit.).

Its use in diarrhœa is so common as to require no citation of authorities.

"When taken in small doses, sufficiently diluted with water, it produces at first no other observable effect than to *increase* the appetite. But after a short time digestion, and secondarily nutrition, are found to have been promoted" (Wood, op. cit., p. 358). "Sulphuric acid is admirably adapted, by its local tonic power, to cases in which, without organic disease or vascular irritation of the stomach, there is loss of appetite, with languid or inefficient digestion, general debility, and especially night-sweats" (Wood, op. cit., p. 361). "To assist the appetite and promote digestion, it is administered to patients recovering from fever" (Pereira, op. cit., p. 359). It is much used in colica pictonum, which is characterised by severe abdominal pain and constipation.

2. ACID NITRIC.

3. ACID HYDROCHLORIC.

- Both are well known to act, in large doses, as corrosive poisons, producing, when swallowed in too large a dose, *inflammation of the stomach* and destruction of its tissue.

Both are among the most commonly employed stomachic *tonics*, increasing the appetite and promoting digestion.

4. ACID OXALIC.

The effects produced by oxalic acid are to be found in every work on Toxicology, the stomach symptoms being *intense pain*, with *vomiting* of bloody matters, and great prostration. After death the stomach is found *red, inflamed*, and corroded.

"M. Nardo, of Turin, states that for above twelve years he employed this acid with uniform success in *inflammation* of the mucous membrane of the stomach" (Waring, Manual of Practical Therapeutics, p. 533).

5. ALUM.

(1.) EXTERNALLY.

"When placed in contact with any tissue containing much blood, we see the blood soon leave the part; the swelling, and at the same time the colour of the part, diminish rapidly, and the tissue seems as if dried up. But" (the opposite effect) "if the alum is placed on the part in greater strength or quantity, or if its employment be frequently repeated, this constriction, this drying up, is not of long duration, but is soon followed by the phenomena of true inflammation" (Trousseau and Pidoux, *Traité de Thérapeutique et de Matière Médicale*, vol. i. p. 189). A similar passage will be found in Pereira, p. 625, and also in Wood, *op. cit.*; vol. i. p. 135.

This primary effect, produced by a weak solution, is the one constantly made use of in using alum as a gargle, and eye-wash, in *inflamed* conditions of these parts, while if applied in too strong a solution healthy parts are inflamed, as seen in the adjoining column.

(2.) INTERNALLY.

"When taken in a large dose, alum provokes *pains in the stomach* and *difficulty of digestion*; and if this dose is doubled or tripled, then often supervenes *vomiting* and *diarrhœa* (Trousseau and Pid., *op. cit.*; p. 189.); Wood, p. 135, &c.

Sir J. Murray speaks in the highest terms of alum in catarrhal affections of the stomach (Waring, *op. cit.* p. 52). It is a good deal used, and with success, in *diarrhœa* (see Pereira, pp. 625 and 627; Wood, vol. i. p. 136; Waring, p. 52).

6. AMMONIA.

In cases of poisoning great depression is produced, with coldness of the surface, feebleness of pulse, and loss of voice, &c. (see works on Toxicology).

Its use as a stimulant in small doses, in cases of fainting, collapse, and general depression, is too well known to require reference.

7. ANTIMONY—TARTAR EMETIC.

Antimony produces among other symptoms, *loss of appetite*, *nausea*, *vomiting*, accompanied by much depression, and collapse. (See Works on Toxicology, &c.) Majendie found in his experiments that tartar emetic produced almost always *inflammation of the lungs* (pneumonia). The animals he experimented on died from pneumonia. Schloëpfer obtained the same results. (See Christison on Poisons, p. 477). In man "the lungs show more or less con-

For the use of tartar emetic in certain forms of dyspepsia, see Graves' Clinical Lectures, p. 852 (Neligan's edition). In *Pneumonia* (inflammation of the lungs), tartar emetic is the medicine which has been most used. Some years ago it was given in large doses, and the result of this treatment was, that the mortality was *much greater than when the cases were left to themselves*. The mortality under large doses of tartar emetic under Rasori was 1 in 5,

gestion in portions of the lobes" (Taylor on Poisons, p. 541, and cases on pp. 541 and 542).

while in cases treated by Dr. Dietl, in Vienna, by diet alone, the mortality was 1 in $13\frac{1}{2}$ (see Dr. Hughes Bennet, Principles and Practice of Med., pp. 292, 295, &c.) These facts throw light on Pereira's remark (p. 698, op. cit.) that "if tartar emetic has a tendency to inflame the lungs, or at least to occasion pulmonary engorgement, we should expect that large doses of it would not be very beneficial in acute peri-pneumonia." These facts of Dr. Bennet's have also an uncomfortable bearing on Dr. Routh's triumphant observation, which we give entire:— "Allopaths, admitting the occasional truth of this doctrine, 'similia similibus curantur,' have given the larger dose. The experiments of Majendie have shown that tartar emetic, in doses of six to eight grains, will produce, amongst other lesions, pneumonia, if not rejected by vomiting. Every day's experience proves the efficacy of large doses of tartar emetic in curing pneumonia and other inflammations of the lungs" (Fallacies of Homœopathy, p. 6). So much for Dr. Routh's proof of "every day's experience." Those physicians who made use of these large doses, find that it is only in "sthenic" cases—that is, in constitutions which are naturally robust and able to bear lowering treatment—that this treatment can be adopted, and that in feeble, debilitated subjects, it is "contraindicated," on account of the certain increase of the already existing depression. But of the use of tartar emetic in small doses, Dr. Gairdner, of Glasgow, Professor of Medicine in the University of Glasgow, says (Clinical Lectures, p. 643)—"In general, I regard the ordinary physiological action of antimony *as quite opposed to its therapeutic action* (Dr. G.'s own italics), and whenever they occur, I make it a rule either to suspend the remedy or diminish the dose, believing it to be, on the

whole, much safer to forego the possible advantage of the antimonial medication, than run the risk of superinducing the least degree of poisonous action." He then gives a case where he gave tartaremetic to an enfeebled, exhausted patient, where in larger doses it would be "contra-indicated," and says—"In this case, as in several others of similar character which have occurred to me, I ventured, *notwithstanding* the extreme weakness and exhaustion of the patient, upon the administration of tartar emetic in small doses, along with diffusible stimulants, and was rewarded by seeing the remedy produce its best effects, viz.:—*a therapeutic without the least trace of a physiological action*. The dose should rarely exceed 1-10th or even 1-12th of a grain, to begin with, in such cases—sometimes even less."

It produces, in physiological doses, vomiting and diarrhœa, with much irritation of the mucous membrane of the alimentary canal.

Given in pneumonia, "antimony was more useful in those cases, precisely, where the *stomach and intestines* were *most irritable*" (Trouss. and Pid.; vol. ii. op. cit. p. 783).

8. ARSENIC.

A case of acute poisoning by arsenic exactly resembles a case of cholera, for which it has been mistaken (see works on Toxicology—Christison and Taylor). It produces *intense pain* in stomach and bowels, *vomiting, purging, cramps* in the legs, and intense *prostration* (see Christison, Taylor, &c.)

Dr. Black, of Chesterfield, recommends arsenic (Lancet, Oct., Nov., and Dec., 1857), as being in his experience a "specific" in *cholera*, even in the stage of collapse. He gives cases, to all appearance "in articulo mortis," cured by arsenic. In the epidemic which occurred to a slight extent in the autumn of 1857, Dr. Black again writes to the Lancet, saying that he has again had recourse with success to arsenic, and states that a Liverpool physician who was long sceptical of its use, becoming disgusted with the failure of the usual means, had at last tried it with such success that he now used no other medicine.

One of the most constant symptoms of poisoning, acute and chronic, by arsenic, is *diarrhœa*.

Trousseau (Clinical Lectures, art. Diarrhœa), advocates the use of arsenic in chronic *diarrhœa*.

Trousseau and Pidoux (art. arsenic, op. cit., vol. i. p. 375), say it moderates the diarrhoea of phthisis.

“Mr. Hunt mentions that small doses of arsenic are of eminent utility in checking chronic diarrhoea, or gastric irritation, although the opposite effect is apt to ensue when the medicine is given under different conditions.” (Handfield Jones on Functional Nervous Disorders, p. 535).

Causes intense gastric pain.

Mr. Hunt, in the above passage, finds it of eminent utility in small doses in gastric irritation; and Dr. Leared (Brit. Med. Jour. 1867) finds it of great service in certain forms of gastric pain.

Arsenic produces in large doses irritability and inflammation of the mucous membrane of the stomach and bowels, with loss of appetite, nausea, vomiting, pain and tenderness in the epigastrium, and diarrhoea. (See works on Toxicology).

On the use of arsenic in the affections of the stomach and bowels, Trousseau and Pidoux say:—“M. Tessier, of Lyons, made this important remark, that in his experience he has found in arsenic the property of stimulating the appetite and facilitating digestion, and at the same time in *diminishing excess of sensibility of the stomach*. He declares that this medicine has seemed to him to exercise a favourable influence in certain chronic affections of the digestive organs, and notably in *gastralgia*. These facts, joined to some analogous observations which we have made personally, seem to us to authorize the employment of arsenic in extremely small doses (*doses extrêmement petites*) in certain refractory affections of the digestive organs; for example, in *dyspepsias*, or gastro-enteralgias, accompanied by obstinate *diarrhoea*, and in certain cases of *lientery*, with a cachetic state, that nothing else can modify. We add here a last remark. It is now-a-days perfectly demonstrated, that several mineral springs, and among others those of Mont Dore, of Bourbonne, of Vichy, of Plombières, and especially of Bussang, contain a dose of arsenic which is appreciable by analysis. Now,

who knows, if this dose of arsenic, hitherto passed over, does not count for something in certain cures of chronic diseases of the digestive organs, the honour of which has hitherto been attributed to the alkaline salts?" (Op. cit., vol. i. p. 377).

Romberg says, "My own experience leads me to assert, that in the numerous and various diseases in which I have of late years employed arsenic, I have invariably seen an improved digestion as marked by a better appetite" (On Nervous Diseases, vol. i. p. 54, Sydenham Soc. Translation, 1852).

Dr. Begbie, of Edinburgh, says, "As to an irritable condition of the gastrointestinal membrane being a bar to its employment, late experience has proved, that in many such cases arsenic is the *most valuable remedy* we possess for allaying and ultimately removing this morbid condition. An intimate sympathy exists between the skin and the mucous membrane of the bowels; and it has been remarked that in many cutaneous affections diarrhoea is apt to occur, and to keep pace with the progress of the primary disease. It is certain that in such cases arsenic can be employed, not only with advantage to the skin affections, but with a *corresponding improvement* in the condition of the bowels; the relief and cure of the two disorders being coincident with the development of the earliest symptoms of arsenical operation. But, apart, altogether from this class of cases, there is another where the skin affection complicates the disease of the bowels, and where the continued irritation, with frequent dejections of vitiated secretions and bloody mucus, gives rise to the suspicion that ulceration of the inner coat has taken place; or where the evacuations are of such a character as to lead to the belief that a process of eruption and desquamation analogous

to that observed on the skin is going on. In such cases, *small* doses of arsenic *cautiously* administered have been found highly serviceable—correcting the excretions—*checking* the *diarrhœa*, and restoring a healthy character to the mucous membrane. Arsenic has lately been extolled in the highest terms as a remedy in *cholera*, having been employed in full and frequently repeated doses during the vomiting, purging, and collapse of the disease.” (Contributions to Practical Medicine, pp. 274, 275).

Dr. Christison, quoting from Hahnemann, describes the symptoms of chronic poisoning by arsenic as follows: “They are a gradual sinking of the powers of life, without any violent symptoms—a nameless feeling of illness, failure of strength, slight feverishness, want of sleep, lividity of the countenance, and an aversion to food and drink, and all the other enjoyments of life. Dropsy closes this scene, along with black miliary eruptions, and convulsions, or colliquative perspiration and purging.” (On Poisons, p. 318).

Arsenic causes various *skin* eruptions (see works on Toxicology, and Begbie, op. cit., and Hunt on Skin Diseases.)

Arsenic in over-doses, or medicinal doses, too long continued, causes uniformly, as is well known, *inflammation* of the conjunctiva of the *eye* with sandy pain, redness and œdema of the eyelids and watering of the eyes. (Works on Toxicology.)

The late Dr. Graves (Clinical Lectures, pp. 841, 842) gives a case where the patient was “in an extreme state of *emaciation and debility*—in fact a complete skeleton, and unable to support himself on his legs. . . . For the last two years, he has *never had sleep at night*, except in consequence of an opiate.” He was put on arsenic, and the result was that his sleep gradually returned, “he daily gathered flesh and strength, and in the course of a month, was so altered for the better, that, were it not for the depressed nose, no one could have recognised him to be the same being whose misery a month ago had so strongly excited our commiseration.”

The Styrian peasants eat arsenic to make them fat and plump.

Is admitted to be the medicine of all others most successful in the treatment of *skin* diseases.

“Arsenic appeared to be a specific in chronic *inflammation* of the *eyes* and of the lids.” (Handfield Jones, op. cit., p. 297.)

“In catarrhal ophthalmia, and more especially in those forms which are of a passive, sub-acute, or chronic character or where the *irritability* of the conjunctiva is *excessive*, arsenic has proved very beneficial in the hands of Dr. Mackenzie. In strumous ophthalmia,

Arsenic produces *epilepsy* (see cases—one of which Dr. Christison calls “a good example of epilepsy supervening on the ordinary symptoms of inflammation,” given by Dr. Christison, on Poisons, p. 312.)

Arsenic produces *convulsive movements* of the voluntary muscles (see Christison, Taylor, &c.) One case recorded by Dr. Taylor (on Poisons, p. 363), had “such a degree of nervous irritability, that a current of air caused spasms and convulsions.” In a case of my own, of poisoning from arsenical wall-paper, which was seen by another medical man, the symptoms so exactly resembled chorea that, before the cause was discovered, I had recommended arsenic as the remedy.

That arsenic produces skin eruptions has been already mentioned. One of the most common forms of this is a pustular eruption on different parts of the body.

CHEST SYMPTOMS.

Dr. Christison says, “Sometimes there are likewise present signs of *irritation* of the *lungs*, and *air-passages*,—almost always *shortness of breath*, (which, however, is principally owing to the tenderness of the belly), often a sense of tightness across the bottom of the chest, and more rarely decided *pain* in the same quarter, darting also through the upper part of the chest. Sometimes pneumonia has appeared a prominent affection during life, and been distinctly traced in the dead body,” (op. cit., p. 302.)

Pereira says (op. cit., p. 655), “In animals which breathe by the lungs, *respiration* becomes *difficult* and *labor-*

Dr. Thorp states that arsenic is a most valuable agent in inveterate cases” (Waring, op. cit., p. 133.) Dr. Begbie (op. cit., p. 298) says, “It has proved useful in rheumatic ophthalmia and other affections of the eye.”

“Has been successfully employed in *epilepsy*, by Pearson, Prichard, Thompson, and others.” (Waring, op. cit., p. 128.)

Is one of the most certain curative agents in *chorea*. Pereira, Mat. Med., article Arsenic, says, “I know of no remedy for this disease equal to arsenic, which in a large proportion of cases, acts almost as a *specific*.” Dr. Begbie of Edinburgh, and many others, speak in the very highest terms of it. (Begbie, op. cit., p. 285 et seq.)

Dr. Black of Chesterfield (Lancet, June, 29, 1867), and several other writers after him, testify to the success of arsenic in small pox, in rendering the course of the disease mild, and preventing pitting.

Several ancient medical writers extol arsenic in various chest affections. Dioscorides says it is useful in “suppuration of the lungs” (probably chronic bronchitis or phthisis.) Also in “inveterate cough,” given by inhalation, and to clear the voice, and internally in asthma (Trouss. and Pid., vol. i., p. 361.) Pliny, Celsus, Galen, Scribonius Largus, Cœlius Aurelianus, and others, up till the time of the Arab physicians, speak to the same facts. (Not having the works of these authors beside me, I am unable to verify the quotations, but I quote from Trousseau and Pidoux, in whose Mat. Med., p. 361, vol. i., the references are given,—D.D.B.) The

ious." In man, "*oppressed* respiration with a *dry cough*," "the breathing is short, laborious, and often painful . . . and the membrane lining the air-passages feels hot and oftentimes painful" (ibid. p. 658.) After death, "occasional congestion of the lungs, and *redness* of the membrane lining the *air-tubes*," (ibid. p. 660.) "The lungs . . . are also specifically affected. The disorder of the lungs is inferred from the local pain, cough, and occasional inflammatory appearance after death" (ibid. p. 663.)

Dr. Taylor (op. cit., p. 365) gives a case where the patient had what he calls a "gastric cough," but unlike gastric coughs, she had "frequent raking of the throat, and expectoration of a muco-purulent secretion mixed with blood." In another case (p. 366), there was "irritation of the throat, larynx, and trachea." Dr. Taylor also records (p. 378) a case of poisoning of a number of children in a large industrial school, where "several had cough of a croupy character." In another case of a family poisoned, Dr. Taylor believes by arsenic, they suffered from "*dry cough*, and after death the lungs and pleuræ (of the father) presented strong evidence of inflammation sufficient to account for death" (p. 120 op. cit.) For numerous cases presenting inflammatory appearances of the air-passages and lungs, see Christison, op. cit., p. 346. Otto Tachenius, an old chemist, after inhaling the vapour of arsenic, was attacked among other symptoms with "*difficult breathing*" (Christison, op. cit., p. 325).

The Styrian peasants also eat arsenic to give them long wind, and find if they suddenly stop the habit, that they are afflicted with shortness and difficulty of breathing (Trouss. and Pid., op. cit., vol. i. p. 364.)

Arab physicians, Rhazes, Mesue, Serapion, James de Damas, and Avicenna speak in similar terms. Avicenna says it is given in "suppuration of the lungs, and chronic cough, with bloody and sanious sputum, and sometimes also in pill against asthma" (ibid. p. 362.)

Dr. Begbie says (op. cit. p. 297), "Arsenic has been employed successfully in many affections of the *bronchial tubes*, in *bronchitis*, in hay-fever, and in other forms of *asthma*. In bronchitis and hay-fever I have found it useful, especially when these affections were associated with such skin diseases as are seen in connection with the rheumatic or gouty diathesis."

"I have found arsenic sometimes of much advantage" (in asthma). (H. Jones, op. cit., p. 401).

Dr. Duclos also recommends it in the same disease (Waring, op. cit., p. 129).

Of the use of arsenic in chronic *bronchitis* and *phthisis*, Trousseau and Pidoux (op. cit., vol. i. p. 375) say, "In phthisis, we have obtained, not cures, but at least a suspension of "accidents," very extraordinary in a disease of which nothing retards the fatal march. We have seen the *diarrhœa* moderate, the hectic fever diminish, the *cough* become less frequent, the *expectoration* take a better character, but we have not cured. Nevertheless, the results which we have obtained are motives of encouragement to us, and nothing prevents us hoping that in cases only slightly advanced, we might obtain a cure." They then describe their method of administering the arsenic in these cases, viz., by inhalation of the vapour from arsenical cigarettes, and then go on to say, "We employ the same means with much greater advantage in simple *chronic catarrhs*, bronchial and laryngeal." At the same time with the fumigations, they give the arsenic internally.

Dr. Leared found advantage from the administration of arsenic in phthisis (Waring, op. cit., p. 132.)

In chronic bronchitis attended with copious expectoration, and much emaciation, M. Garin employed arsenic with much success (ibid.)

9. BELLADONNA.

Produces *convulsions*. (For numerous cases, see Trousseau and Pidoux, vol. ii. op. cit. p. 55; and Taylor on Poisons, art. Belladonna).

Trousseau and Pidoux (op. cit. vol. ii. p. 66) speak in very high terms of the remedial powers of Belladonna in *epilepsy*. In his Clinical Lectures (art. Epilepsy), Trousseau names it as the medicine he has got most success from in this disease.

Trouss. and Pid. (ibid pp. 66, 67) say, "We have very often to praise belladonna in the treatment of *convulsive* diseases, but above all in that of eclampsia of infants, and of puerperal women. We never rely on this means at the commencement of the convulsions, but when they return very often in the day, and several days on end, belladonna administered in *small* doses produces sometimes unhopd for results."

Brown-Séquard (Lectures on Functional Nervous Affections, part i. p. 66) says, ". . . . The fact that a remedy, in *different doses*, can produce two *opposite* effects. Belladonna, for instance, by its influence on the blood-vessels of the spinal cord, will *diminish* sensibility, the reflex faculty, the tendency to convulsions, &c. ; but, when the dose is *toxic*, sensibility and the reflex faculty become morbidly *increased*, and *convulsions occur*."

"Finally, we ought not to omit the effect produced on the *bladder*, which in some cases is evidently partially paralysed" à demi paralysée (Trouss. and Pid., op. cit., vol. ii. p. 54).

"We observe besides, . . . an *involuntary* emission of urine" (Trouss. and Pid., op. cit. vol. ii. p. 56).

It is one of the most efficacious remedies in the treatment of nocturnal *incontinence of urine* (see Trouss. and Pid. vol. ii., op. cit. pp. 67, 68; Brown-Séquard, op. cit. pp. 67, 68; H. Jones, op. cit. p. 442; Waring, art. Bell. ; and numerous cases from time to time recorded.)

Produces *mania* with *hallucinations*, also *delirium*, (see Trouss. and Pid., art. Bell., and works on Toxicology).

Produces a general *scarlet eruption*, resembling that of scarlet fever (see Trouss. and Pid., art. Bell.; Pereira, art. Bell.; Handfield Jones, op. cit., p. 563; Waring, art. Bell.; Taylor on Poisons, p. 827).

Trouss. and Pid. (op. cit., vol. ii., p. 69) say, "Analogy, that guide so sure in therapeutics, ought to lead us to use belladonna in the treatment of *mania* (*folie*), inasmuch as belladonna, taken in large doses, *produces* a temporary mania; for *experience has proved* that a *multitude* of diseases are cured by therapeutic agents, which seem to act in the same manner as the cause of the disease to which we oppose the remedy."

"In the *delirium* occurring in fevers and in erysipelas, belladonna is sometimes a more effectual sedative than opium, and is often admissible when the latter is not so." (Waring, op. cit., p. 150).

Hahnemann's observation that belladonna acts as a remedy in *scarlet fever*, and as a preventive also, has been opposed by various Allopathic writers; but Waring (op. cit., p. 148) gives most fairly the authorities and facts for and against, and ends up by saying, "The weight of testimony is decidedly in favour of its *preventive* action; but further observations are required." He then proceeds to say that "as a *remedial* agent in scarlet fever, belladonna appears to be undoubtedly a valuable remedy." He quotes Dr. Burne, Mr. E. Wilson, Dr. J. Gardner, "and others," in proof of its value.

In *erysipelas*, on account of this red rash produced, it is *the* remedy used by Homœopaths. In support of this practice, there is the authority of the celebrated surgeon, Mr. Liston, who in a Clinical Lecture (Lancet, April 16, 1836) gives several cases of erysipelas treated by himself with aconite and belladonna. He says, after telling its good effect, "Of course, we cannot pretend to say positively in what way this effect is produced, but it seems almost to act *by magic*; however, so long as we benefit our patients

by the treatment we pursue, we have no right to condemn the principles upon which this treatment is recommended and pursued." He then goes on to say that this is the homœopathic remedy for erysipelas, and continues, "*I believe in the homœopathic doctrine to a certain extent, but I cannot as yet, from inexperience on the subject, go the lengths its advocates would wish, in as far as regards the very minute doses of some of their medicines. The medicines in the above cases were certainly given in much smaller doses than have ever hitherto been prescribed. The beneficial effects, as you witnessed, were unquestionable. I have, however, seen similar good effects from the belladonna prepared according to the Homœopathic Pharmacopœia, in a case of very severe erysipelas of the head and face, under the care of my friend, Dr. Quin. The inflammatory symptoms and local signs disappeared with very great rapidity. Without adopting the theory of this medical sect, you ought not to reject its doctrines without due examination and enquiry. We shall continue the employment of this plan of treatment in erysipelas, so long as we find it as successful as it has been.*"

10. BROMIDE OF POTASSIUM.

Produces, in continued large doses, a state of mind exactly analagous to what occurs in a patient affected with epilepsy of long standing (see Bazire's Account of the action of bromide of potassium, in a Note to his Translation of Trousseau's Clinical Lectures on Epilepsy).

I am not aware that bromide of potassium has ever produced convulsions proper, but bromide itself certainly has (see experiment of Butske in Christison on Poisons, p. 204.)

It is universally admitted to be one of the most valuable medicines we have in the treatment of epilepsy and various forms of convulsions.

11. BISMUTH.

Produces *gastro-enteritis*, with *vomiting*, watery *purging*, swelling and tension of the belly, &c. (Christison, op. cit., p. 495).

In a case recorded as above, the stomach was found "*very red*, with numerous purple pimples, the whole intestinal canal red, and here and there gangrenous, especially at the rectum."

Pereira says, "*Large medicinal doses disorder the digestive organs, occasioning pain, vomiting, purging,*" &c. (op. cit., art. Bism).

Pereira says (art. Bismuth), "It has been particularly used and recommended to relieve *gastrodynia* and cramps of the stomach, to allay sickness and *vomiting*, and as a remedy for pyrosis or water-brash."

Dr. Theophilus Thompson recommends it in the *diarrhœa of phthisis*, and thinks that in this "it surpasses our most approved remedies" (Pereira, *ibid*).

Pereira also says (*ibid*), "On account of the frequent relief given by it in *painful* affections of the stomach, it is supposed to act on the nerves of this viscus as a sedative."

Trousseau and Pidoux, (art. Bismuth, op. cit., vol. i. p. 202), say, "It suits persons, whose digestion is habitually laborious or difficult, and is accompanied by a tendency to *diarrhœa*. . . . It is particularly useful in subacute *gastritis* and in *gastralgia*, which is complicated by a state of *irritation* of the mucous membrane of the stomach." When there is constipation instead of *diarrhœa* present, they consider it not nearly so useful. A quack powder called "Paterson's, or the American powder," containing bismuth and magnesia, became very popular in the treatment of vomiting in children during dentition (*ibid*). "In *diarrhœa*, which seems to be to the intestinal mucous membrane what a pulmonary catarrh is to the respiratory organs, and which we can, in the proper sense of the term, call 'an intestinal catarrh,' the employment of the subnitrate of bismuth, after the first access of the febrile symptoms have passed off, is exactly (*parfaitement*) indicated" (*ibid*, p. 203).

In the case of poisoning by bismuth, recorded by Christison, and alluded to above, there were besides the vomiting, watery purging, &c., *cramps* and *cold*-

In cholera, Trousseau and Pidoux, finding it so successful in the premonitory *diarrhœa* of *cholera*, recommended it highly, and say that, in 1854, "It

ness of the limbs, intermittent pulse, hiccup, laborious breathing, and suppression of urine.

came into such general use that druggists dispensed enormous quantities of it." It had "incontestible efficacy" (ibid, p. 203).

12. CANTHARIDES.

Is well known to produce *strangury*, *dysuria*, and *inflammation* of the whole urinary tract of mucous membrane, from the kidneys downwards.

Groenevelt, an English physician, in 1693, used it and recommended it in the treatment of *dysuria*, for which piece of homœopathy he was put in Newgate, at the instance of the President of the the College of Physicians. Werloff, in 1793, advised it in the same class of cases.

13. CINCHONA AND QUININE.

"Each day's observation," says M. Bretonneau, "proves that cinchona given in a large dose, determines, in a great number of subjects, a very *marked febrile* movement. The characters of this fever, and the time when it shows itself vary in different individuals, oftenest, tinnitus aurium, deafness, and a species of intoxication precede the invasion of this fever; a slight *shivering* then occurs; a *dry heat*, accompanied by *headache* succeeds to these first symptoms; they gradually abate, and end by *sweat*. Far from yielding to new and higher doses of this medicine, the fever produced by cinchona is only exasperated. . . . But if strong doses are renewed each day, and continued during a long time, besides the stomach pains of which we have spoken, there manifests itself a species of *fever* exactly indicated by M. Bretonneau, and which affects an intermittent type, when the cinchona is given in an intermittent manner. This fever is a species of vicious circle in which very often inexperienced physicians turn, who are ignorant of the action of cinchona; they redouble the doses of the medicine and throw the patient into a state which may be very serious" (Trousseau and Pidoux, op. cit., art. Cinchona, vol. ii., pp. 351 and 364.)

It is par excellence, as every one knows, *the* remedy in *intermittent fever*, and all diseases affecting an intermittent type. It was the reverse action of cinchona in large and small doses which led Hahnemann to the discovery of the law, "*similia similibus curantur*."

“In the healthy body, in a moderate dose, its ingestion causes a feeling of *inconvenient heat*, and *weight* in the region of the *stomach*. In persons a little irritable, it cannot be borne, and it causes *vomiting*. . . . It causes *pains* in the *stomach* which take in certain persons a remarkable intensity. These pains which persist some length of time after the medicine has been omitted, yield with difficulty, and ought, in general, to prevent physicians employing it for too long a time continuously in the treatment of gastralgias, which call for tonics” (ibid. p. 350.) “When the digestive tube is in a normal state, quinine determines there a moderate excitation, which shows itself oftenest by a simple augmentation of the functions of that organ. But if the digestive tube be in a morbid condition (*pathologique*), or if the dose be *too large*, or still more, if the use of the medicine be too *prolonged*, this excitation changes easily into *inflammatory irritation*, in all its degrees, and with all its consequences, viz., *thirst*, *vomiting*, local *pains*, and diarrhoea, &c.” (ibid. p. 356.)

Produces headache, giddiness, vertigo, noises in the ears, &c. (See Trouss. and Pid., ibid. pp. 350, 354, 355, &c., and other works on *Materia Medica*.)

Is known to every one as one of the most constantly used medicines in *dyspepsia* as a “tonic.”

Is well-known to cure these very conditions.

14. CHLORINE.

When inhaled undiluted, or in too strong a solution, causes spasms of the glottis, violent *spasmodic cough*, *tightness* of the *chest*, *difficulty* of *breathing*, and *inflammation* of the *air-tubes* and *lungs*. This action is well-known (see Pereira, Wood, Trousseau and Pidoux, Christison, &c., art. Chlorine.)

Trousseau and Pidoux, in their article on Chlorine (op. cit., vol. i., p. 471) say, “It cannot be denied that chronic *catarrhs* have been most successfully modified by that method of treatment, which has most frequently *produced* acute bronchitis.” They then state that M. Toulmouche of Rennes obtained good results in the treatment of acute and chronic *catarrhs*, by inhalations of chlorine. His cases amounted to 309. Dr. Wood of America (op. cit., vol. ii. p. 354) says of chlorine, “As a

useful remedy in chronic *inflammation* of the *air-passages*, I can speak confidently of its good results." He discovered its beneficial action by its curative effect on himself, while suffering from chronic catarrh. "From this fact, I inferred the use of chlorine inhalations in chronic bronchitis, and have ever since taught this use of the remedy to my pupils. Others have found it not less beneficial" (*ibid.*) Its good effect is now recognized by the profession, as a "vapor chlori," or inhalation of chlorine, is now officinal in the British Pharmacopœia of 1867.

15. CHLORATE OF POTASH.

Produces *stomatitis*. (See case in Med. Times and Gazette, May 22, 1858).

Produces *salivation*. Trousseau and Pid. (*op. cit.*, vol. ii., p. 594), speaking of the experiments of M. Isambert, say, "The most remarkable, and so to speak characteristic, phenomenon which follows the ingestion of chlorate of potash, consists in salivation, proportionally abundant, as one increases the dose," &c., &c.

Is universally acknowledged to be a specific in ulcerative *stomatitis*; allopaths, even the most sceptical, admit it as one of the few specifics they possess.

Trousseau and Pidoux (*op. cit.*, vol. ii. p. 595) say, "*Mercurial stomatitis*" (a constant and essential symptom of which is excessive salivation) is, we may truly say, the *veritable triumph* of chlorate of potash." They then refer to the success of M. Herpin in this complaint, and say, "The happy results announced by M. Herpin were not slow in being verified in every direction; and, at the present day, thanks to the most numerous and most decisive experiments, we may consider chlorate of potash, given internally, if not an infallible specific, at least as the means most generally efficacious in the treatment of mercurial stomatitis."

16. CHLORIDE OF SODIUM--COMMON SALT.

Causes in large doses *vomiting*, and in still larger ones *inflammation* of the intestinal canal (see works on Toxicology).

Known to every one as an article of diet promoting digestion.

17. COPAIBA.

"If continued long, or given large-

Its use in certain conditions of *in-*

ly, the copaiba is apt to produce an obvious *irritation* of the *urinary passages*, evinced by a disposition to frequent micturition, and uneasy sensation of burning, or pain in passing urine. . . . The irritation of the urinary organs sometimes amounts to complete strangury, with scalding and cutting pains, bloody and scanty urine, &c. Occasionally the renal irritation is so great that the kidneys almost cease to secrete" (Wood, Mat. Med., vol. ii., p. 614).

"If continued long, or given largely, it is apt to *disturb the bowels*, . . . producing nausea and vomiting, with or without purging" (ibid).

Inflammation of the *urinary passages* is well known. From its irritative effect (as seen in the opposite column), it is a usual rule not to give it, in the usual doses, during the stages of acute inflammation, for fear of aggravation. Trousseau and Pidoux' article on copaiba, on this and other points, is well worth study. "In chronic *cystitis*, occurring in persons of a strumous diathesis, or in debilitated constitutions, more advantage is often derived from stimulants of the urinary organs, such as the turpentine, and *above all small doses* of copaiba and cubeb pepper." (Cyclop. of Pract. Med., vol. i., p. 505).

Mr. Liston (Elements of Surg., p. 580) says of cystitis, that copaiba will "often remove speedily the most intense irritation when all other means have failed."

"In chronic inflammation of the *intestinal* mucous membrane, especially when attended with ulcers, or supposed to be so, it would appear to be clearly indicated, and it has, in fact, been employed with decided advantage, associated with opiates, in chronic *diarrhœa* and dysentery" (Wood, op. cit., vol. ii., p. 615).

18. COPPER (CUPRUM.)

Produces nausea, *vomiting*, with griping colicky *pains* in the stomach and *bowels*. The abdomen is distended and painful, the pain increased on pressure, and not relieved by vomiting. Then comes *purging* with *tenesmus*. There is violent headache, with *cramps* in the thighs and legs. There is hurried and difficult breathing, with small, quick, irregular pulse, great weakness and prostration, intense thirst, cold perspiration and coldness of the limbs, giddiness, stupor, coma, and generally *convulsions*, followed by paralysis of motion and sensation, and death. The stomach and

Is one of the most trusted remedies in chronic *diarrhœa*, and is resorted to, often with success, when all other remedies fail. In the diarrhœa of phthisis, when there is generally ulceration of the intestines, it is more trusted to than any other remedy. These facts are so well known as to require no references. Wood, of America, (op. cit., vol. i., p. 408) says "The particular condition in which I have found it (sulphate of copper) especially useful, and in which, so far as my experience goes, it is equalled by no other remedy, is a kind of chronic *enteritis*, attended with *diarrhœa*, distressing

intestines after death are found much *inflamed*, and often *ulcerated* (see works on Toxicology).

pains in a particular part of the abdomen, with or without tenderness on pressure, emaciation, great depression of spirits, pulse often though not necessarily frequent, and a moist tongue. In such cases, I have been disposed to ascribe the obstinacy which they exhibit, and sometimes in an extraordinary degree, to the existence, within a comparatively small extent of the bowels, of a chronic indolent *ulceration*, which requires a strongly excitant and alterative impression to enable it to take on a healing tendency. I have seen these, after being treated by a diversity of remedies, opiates, astringents, &c., and lingering month after month without permanent relief, yield most happily to the persevering use of this remedy, combined with a little opium to render it less offensive to the stomach. A beneficial change is usually experienced in a few days, and afterwards regularly advances to a cure."

As before stated, produces convulsions.

In *chorea* and *epilepsy* has been used with success (Wood, op. cit., vol. i., p. 409; Waring, op. cit., p. 282; Pereira, op. cit., pp. 802, 803, &c.)

19. CUBEBS.

"In excess, produces *irritation* or inflammation of the *urinary* passages, and a general febrile condition." (Wood, op. cit., vol. i., p. 331.)

Its use in certain states of irritation and inflammation of the urinary organs is well known. For its use in chronic inflammation of the bladder see the quotation given under *copaiba* from Cyc. Pract. Med.

20. DIGITALIS.

The effect of digitalis in large doses in producing *feeble* and *irregular* action of the *heart* and pulse, with great *depression* and tendency to *fainting* is known to every medical man.

Dr. Handfield Jones (on Functional Nervous Disorder, p. 539) says "Digitalis has long been employed and ranked as a depressant agent, and that it

may be used as such very effectively there is no doubt." (For rest of the quotation see opposite column).

"Latterly, however, various observers have satisfied themselves that it may, under certain circumstances, produce *diametrically opposite* effects, acting, in fact, as a powerful *cardiac toner*, and *stimulator*. I stated my belief in this in 1859. (Brit. Med. Journ. Dec. 17), and since then, evidence has accumulated considerably, proving that such is the case. Winogradoff and Trube show by exact experiment that digitalis if *not* given in *excess*, does not diminish, but actually increases the pressure on the arteries. . . . From the above evidence there seems good ground to conclude (1) that digitalis in the *milder* degrees of its action has a *stimulating* influence on the heart. . . . and (2) that its *stronger* action has the *reverse* effect, like galvanism or mechanical irritation, arresting the heart's movements. . . . Digitalis *tones* and *strengthens* the action of a *feeble* heart, but *lowers* that of a *vigorous* one."

The best modern physicians now admit this double action of digitalis from large and small doses as an undeniable fact.

21. GOLD (AURUM).

In large doses it causes considerable *gastric irritation*, or even inflammation of the stomach, colic, *diarrhœa*, dryness of the tongue, and redness of the throat. (Christison, op. cit., p. 494; Trouss. and Pid., quoting from Legrand and Percy, vol. i., op. cit., p. 391.)

In small doses, Trouss. and Pid. (art. Gold, vol. i., p. 386) say that it *increases* the *appetite* and the rapidity of digestion, "not only in persons in health, but in those whose stomachs have been enfeebled by chronic disease or by prolonged low diet." Constipation also occurs (ibid). They also say that Legrand published a number of cases of children, affected with *diarrhœa*, *vomiting*, and *dyspepsia*, who had got into a state of marasmus, which excited considerable anxiety, and in these cases he found gold have a wonderful power of restoring them to health. (Ibid. p. 394).

22. HYDROCYANIC ACID.

Produces *convulsions*, sometimes true tetanus (see all works on Toxicology and Materia Medica).

Produces *nausea* and *vomiting* with sensation of heat in the stomach. After death the stomach shows evident symptoms of *irritation*, redness, &c. (see Christison, op. cit., pp. 764, 774, 775; Taylor, op. cit., pp. 640, 650; Wood, op. cit., vol. ii., pp. 175, 176; Pereira, op. cit., pp. 1794, 1796; Trouss. and Pid., op. cit., vol. ii., p. 135).

Produces *dyspnœa*, *hurried* and *difficult breathing*, *palpitation* of the heart, *pain* in the *precordial* region, feeling as of *suffocation*, feeling of *anxiety*. These symptoms are not the same as the stertorous and laborious or hurried breathing which are the precursors of death, but have been produced in the early stage, and with comparatively small doses. For example, in manufactories where hydrocyanic acid is disengaged, workmen feel among other symptoms "difficult respiration, pain in the region of the heart, sense of suffocation, constriction in the throat, and palpitation." (Dr. Chanet, Gaz. des Hôpitaux, July, 1847, quoted by Taylor and Wood.) See Taylor, op. cit., p. 638, &c., &c.; Wood, op. cit., vol. ii., p. 147, &c.; Christison, op. cit., p. 764, &c.; Pereira, op. cit., p. 1794; and Trouss. and Pid., loc. cit., p. 136.

It has proved serviceable in *chorea*, and also in tetanus. (Waring, op. cit., p. 408.)

Its use in cases of *sickness* and *vomiting*; in cases of *dyspepsia*, with *pain* in the stomach, and of irritability of the stomach with vomiting are well known. (See Pereira, op. cit., pp. 1798, 1799, who quotes various authors., Waring op. cit., p. 407.)

As to its use in spasmodic *asthma*, Waring says "We have a large mass of evidence in favour of hydrocyanic acid" (op. cit. p. 405). He also (ibid) quotes authorities—Majendie, Elliotson, Granville, &c.—as to its use in "catarrhus suffocations." In diseases of the *heart*, in "*palpitation* and other irregularities in the function of the organ," Wood (op. cit. vol. ii., p. 181) says "I think its powers most valuable. . . . I know no medicine better calculated to alleviate the disturbed function, and afford ease and comfort to the patient." In angina pectoris it has been found of value. (Waring, p. 405), see also Trouss. and Pid. vol. ii. p. 137, who there mention that Bréra, Macleod, Heincken found it useful in palpitation of the heart.

23. IODINE AND IODIDE OF POTASSIUM.

When the vapour of iodine is inhaled, and also when iodine is given internally, it produces *coryza*, sometimes very severe, with frontal headache, lacrymation, redness of the conjunctiva, dryness of the throat, irritation and *inflammation* of the *air-passages*, with *cough*, *difficulty* and quickness of breathing. (Trouss. and Pid., op. cit., vol. i., p. 291; Wood, op. cit.,

The value of iodine when inhaled in *coryza* and *catarrh* is now well known, so that a "vapor iodi," or inhalation of iodine is now officinal in the British Pharmacopœia of 1867. "In bronchorrhœa or catarrh of the mucous membrane of the bronchial tubes, iodine is evidently useful. . . . Thus we recommend with confidence inhalations of iodine, under different forms,

vol. ii., p. 326; Pereira, op. cit., p. 387; Christison, op. cit., p. 196, &c.)

“Given in such quantities as to make its action sensible, it not unfrequently at first somewhat *increases* the appetite, but this is an effect which it produces *in common with most other irritants*, and which if the *dose be increased* passes into positive *irritation*, as evinced by gastric uneasiness, nausea, and some disturbance of the bowels, with or without colicky pains.” (Wood, op. cit., vol. ii., p. 326.) See also Pereira, op. cit., p. 388. Orfila found that on himself 4 or 6 grains produced “a sense of constriction in the throat, sickness, pain in the stomach, and at length vomiting and colic” (Christison, op. cit., p. 194.) Trouss. and Pid. (vol. i., p. 292) say that it produces *emaciation*, and that “this emaciation is sometimes so marked, that patients become in a short time unrecognisable, and take on the appearance of individuals far gone in consumption.”

in the treatment of certain cases of *laryngitis*, of *bronchitis* which has passed into the chronic stage, in which often we have been able to prove to ourselves its value” (Trouss. and Pid., vol. i., op. cit., p. 320.) These same authors (ibid. p. 319) quoting authorities who have found iodine useful in spasmodic *asthma*, say, “For our own part, we have had occasion to try iodide of potassium in spasmodic asthma, and we can affirm that in many circumstances we have observed it to have an efficacy (efficacité) truly remarkable.”

For other authorities for the use of iodide of potassium in chronic bronchitis and asthma, see Waring, op. cit., p. 598.

“Sometimes it *increases* the appetite—an effect noticed both by Coindet and by Lugol, from which circumstance it has been denominated a tonic” (Pereira, op. cit., p. 388.) Trouss. and Pid. (art. Iodine), also notice the increase of appetite.

Lugol states that it increases the size and growth, and promotes embonpoint, Pereira (op. cit., p. 389.)

Scoresby Jackson (Mat. Med., p. 132) says, “General emaciation is said to be caused by the use of iodine; but this effect is sometimes denied by those who call iodine a tonic, and state that patients improve in general appearance and grow fat during its exhibition. These statements are not irreconcilable.”

able ; a *gentle irritation* of the stomach, with slightly increased activity of the absorbents, *not too long continued*, may increase the appetite, promote assimilation, and conduce to embonpoint ; *but* if the irritation be *too severe*, or *too long continued*, and the absorbents be too highly stimulated, the digestive functions may be impaired, and emaciation be the result."

Produces *salivation* and *soreness* of the *mouth*. Iodide of potassium especially does this. (Pereira, op. cit., p. 388 ; Trouss. and Pid., op. cit., vol. i., p. 295 ; Christison, op. cit., pp. 197 and 201, &c.)

Is very useful in the treatment of *mercurial salivation* (Trouss. and Pid. vol. i., op. cit., p. 322.)

Trouss. and Pid. (ibid. p. 323) say, "Every one knows how refractory in the majority of cases is salivation occurring during pregnancy. On this point, we have read with interest an observation published by Dr. Lamaëstre, where a salivation which, by its abundance, threatened to destroy the patient, was found rebellious to all means employed, but was cured very rapidly by iodide of potassium administered in the form of pastilles."

Produces various *skin* diseases "of the nature of acute exanthems, such as erythema, urticaria. When the action of the iodine is continued, these symptoms take the character of prurigo, of acne, or of eczema" (Trouss. and Pid., op. cit., vol. i., p. 291.)

"What is more certain is, that the medicine occasionally gives rise to eruptions on the surface, erythematous, papulous, eczematous, or impetiginous" (Wood, op. cit., vol. ii., p. 327.)

"With regard to chronic diseases of the *skin*, notably in scaly diseases, iodine has long ago given its proofs" (Trouss. and Pid., vol. i., p. 312, op. cit.) "Besides the diseases already mentioned, there are many others in which iodine has been used with considerable advantage ; for example, chronic skin diseases, as lepra, psoriasis, &c." (Pereira, op. cit., p. 395.)

"Chronic cutaneous eruptions are also among the complaints in which iodine is often used as an alterative" (Wood, op. cit., vol. ii., p. 337. See also Waring, op. cit., p. 423.)

Produces inflammation of the *liver*. Christison says, referring to two cases, "It is not improbable that iodine possesses the power of inflaming the liver" (on Poisons, p. 195.)

"Iodine has been supposed to possess some specific power of influencing the liver, not only from its efficacy in alleviating or curing certain diseases of this organ, but also from the effects

"In chronic inflammation, induration, and enlargement of the liver, after antiphlogistic measures have been adopted, the two most important and probable means of relief are iodine and mercury, which may be used either separately or conjointly. If the disease admit of a cure, these are the agents most likely to effect it" (Pereira, op. cit., p. 394.)

of an over-dose. In one case, pain and induration of the liver were brought on; and in another which terminated fatally, this organ was found to be enlarged and of a pale-rose colour" (Pereira, op. cit., p. 394.)

Mr. Twining says, that of twenty-three Europeans in India to whom he had prescribed it internally, for the cure of various diseases not considered hepatic, five became affected with pain in the right side. He says, "The observations of our professional brethren in Europe afford reason to believe that iodine, administered in *large* doses, is liable occasionally to excite pain in the region of the liver; and in some instances, the existence of hepatitis in such cases has been proved by post-mortem inspections" (quoted by Waring, op. cit., p. 427.)

"Chronic enlargement of the liver, to such an extent that the organ extended below the umbilicus, the sequel of remittent fever in a youth of seventeen, was entirely removed by frictions with a strong iodine ointment, and a course of purgatives." (Dr. W. Thompson, quoted by Waring, op. cit., p. 427.)

"I have seen iodine, in the form of iodide of potassium, given in chronic diseases of the liver with evident benefit" (Waring, *ibid.*)

"If, therefore, you meet a case of enlarged liver in which you cannot clearly trace the symptoms to inflammation, and it presents analogies to the present one, you will employ the hydriodate of potash" (Grave's Clin. Lect., Neligan's edit., p. 631.)

24. IPECACUANHA.

Is well known to every one as producing *sickness* and *vomiting*. It also causes local *inflammation* in the stomach (Trouss. and Pid., op. cit., vol. i. p. 727.)

Braun of Vienna, a great authority, recommends it in the *sickness* of *pregnancy*. (See Edin. Med. Journal, Feb., 1864.)

Pereira (op. cit., p. 1598) says, "In *indigestion*, Daubenton gave it in doses just sufficient to excite a slight sensation of vermicular motion of the stomach, *without* carrying it to the point of nausea. Eberle tried it in his own case, with evident advantage. An anti-emetic quality has been assigned to it by Schönheider." An Edinburgh "Allopathic" physician, whose name I am at present not at liberty to publish, informed me that he has long known Ipecacuan wine, in doses of two drops, to be the most successful remedy in the treatment of *sickness* and *vomiting*.

It also purges. Trouss. and Pid. (op. cit., vol. i. p. 726) say "This purgative effect is even obtained in nearly half the cases of persons who have been fully vomited by this medicine."

Numerous authors have recommended it and lauded it highly in the treatment of *dysentery* and *diarrhœa*. (Trouss. and Pid., op. cit., vol. i. p. 727; Wood, op. cit., vol. ii., p. 437; Pereira, op. cit., p. 1591, &c. &c.) Its use in

this disease has gained it the name of “*Radix anti-dysenterica*.”

Trouss. and Pid. (op. cit., vol. i. pp. 727, 728) say, “In simple diarrhœa which depends on a saburral state of the stomach” (by which they mean, a state of acute or sub-acute gastritis, with pain, tenderness, and vomiting), it is of great use. They give it in emetic doses, according to their theory of “medication substitutive,” which, as already explained, is but a rough homœopathy. “But,” they go on to say (ibid), “in chronic diarrhœa, where there is no ground for supposing it dependent on phthisis, or simple ulcerations of the mucous membrane, ipecacuanha given in small doses (5 to 10 centigrammes = $\frac{3}{4}$ to $1\frac{1}{2}$ grains) every two hours, in a suitable vehicle, in such a manner *as neither to provoke vomiting nor purging* is of service.” They also give it in the diarrhœa of children along with calomel (ibid.) The use of calomel here is also homœopathic (see Calomel—Mercury.)

Ipecacuanha produces *irritation* of the *bronchial tubes*, *difficult breathing*, and *asthma*. This is too well known to require citation of authorities.

The use of ipecacuanha in *asthma* and *asthmatic bronchitis* is a piece of treatment of every day occurrence. Trousseau and Pidoux (ibid) thus proceed to explain its action. “The pathological laws which we have established in treating of the ‘medication substitutive,’ explains up to a certain point the good effects of ipecacuan in nervous and humid asthma, but whatever may be the explanation, we must admit the fact.”

Sir John Forbes, one of the chief writers against Homœopathy, in his article on Asthma, in the Cyclop. of Pract. Medicine (vol. i. p. 200), says of the use of ipecacuan in asthma, “He (Akenside) says the medicine proved equally successful whether it produced nausea or vomiting. It is probable that it would have proved still more successful if it had produced *neither*. Ipecacuan is certainly a remedy of con-

siderable power in the asthmatic paroxysm ; but this seems altogether independent of its emetic properties. *Practitioners of experience*, without subscribing to the doctrines of Homœopathy, *will certainly think more favourably of it on account of its peculiar tendency to induce fits of asthma* in the predisposed. Long before the time of Hahnemann, the *main principle* of his doctrine was recognised by practical men in the adage—‘*nil prodest nisi læditur idem.*’ ”

25. KREASOTE.

“Swallowed in large doses, causes *vomiting* and purging. Larger doses than one or two minims give rise to nausea, vomiting, vertigo, headache, and heat of head ” (Pereira, op. cit., p. 2013).

“As an internal remedy, Kreasote has been principally used, in this country, as a medicine possessing extraordinary powers of arresting *vomiting*.” (Pereira, op. cit., p. 2014).

26. MAGNESIA.

Produces purging in large doses.

Often used in certain cases of diarrhœa, alone or in combination with rhubarb.

27. MERCURY (HYDRARGYRUM.)

(CALOMEL, GREY POWDER, AND CORROSIVE SUBLIMATE).

Mercury is well known as a purgative, producing *diarrhœa*. In cases of acute poisoning, especially with corrosive sublimate, an artificial *dysentery* is produced, with stools consisting chiefly of mucus mixed with blood, tenesmus, tenderness of the abdomen, with ulceration of the large intestines (see works on Toxicology).

Trouss. and Pid. (op. cit., vol. i. p. 267), say, “Experience has shown that one of the most powerful methods of treatment in *dysentery* is calomel, given in the form of vapour.”

Indian physicians, Annesley, Johnson, Sir Ranald Martin, and Waring testify to the same fact. Dr. Underwood (on Diseases of Children, 9th ed., p. 198)—I have not verified this quotation, but give it on Waring’s authority—observes that in the *diarrhœa* of infants, when ordinary means fail, calomel often proves a sovereign remedy. Dr. Wood, of America (op. cit, vol. ii., p. 249), speaks highly of calomel in doses of 1-12th of a grain, frequently repeated, as a remedy in diarrhœa of young children, and “cholera infantum.” See also a quotation from

The action of mercury on the *liver* has recently been called in question, but Graves, among others (op. cit., p. 344), brings proofs of its power of producing "disease and enlargement of the liver." He says, "It cannot be denied that the immoderate use of mercury has been productive of liver disease" (ibid).

That mercury produces symptoms closely resembling those of syphilis, has been denied, but the resemblance between the two cannot fail to strike any one who reads a passage in Troussseau and Pidoux (op. cit., vol. i. pp. 242, 243). In this passage, these physicians compare and differentiate the symptoms produced by mercury and syphilis respectively, and this comparison brings out very strongly the resemblance. We would have quoted the passage entire, but in a pamphlet which may be read by non-professional people, it would be improper to do so.

A *strong* solution of corrosive sublimate, when applied to the *eye*, causes much pain and inflammation of the conjunctiva. This is well known.

Trouss. and Pid. on the action of calomel in diarrhœa of children, already given under ipecacuan.

In affections of the *liver*, inflammatory or otherwise, the use of mercury is a thing of every day occurrence. Dr. Graves, in speaking of the use of mercurials in liver affections, says (op. cit., p. 344), "In this instance *we are compelled to allow* that our practice may furnish weapons to be turned against us by the disciples of Homœopathy." See also a quotation from Pereira on the use of mercury in liver disease, given under Iodine.

Mercury is "*par excellence*," the remedy for syphilis.

Dr. Graves (Clinical Lect., p. 784), after saying that "every practical physician knows that mercury may and does give rise to a train of symptoms bearing some analogy to those of secondary syphilis," says, speaking of a case he has described, "Here you perceive, we have a remarkable analogy between the diseases produced by mercury and syphilis. . . . It is *well known* that some active remedies have a tendency to produce diseases somewhat analogous to those they are known to cure. This is *frequently observed* with respect to *mercury, belladonna, strychnia, quina, hydriodate of potash, and some other powerful medicinal agents*—in fact it is hard to expect that a remedy will cure a disease affecting a certain tissue or tissues, unless it has some specific effect on such tissues; and in this point of view we have an example of the '*similia similibus curantur*' of the Homœopathists."

A *weak* solution of corrosive sublimate is frequently prescribed as an *eye-wash*, in conjunctival inflammation of that organ.

28. NUX VOMICA—STRYCHNIA.

' If the dose is *too large*, it is by no

For its effect in *increasing* the appe-

means rare to see *loss of appetite* produced" (Trouss. and Pid., op. cit., p. 829), "In somewhat larger doses (than those which increase the appetite, &c.), the stomach not unfrequently becomes disordered and the appetite impaired" (Pereira, op. cit., p. 1485). "In *large* doses, its operation upon the stomach becomes *irritant*, causing loss of appetite, epigastric uneasiness, cardialgia, and sometimes vomiting or purging" (Wood, op. cit., vol. i. p. 817). Produces "pain and heat in the stomach, nausea, and vomiting" (Pereira, op. cit., p. 1487).

Is well known to produce *convulsions*.

tite, promoting digestion, and relieving constipation, see Trouss. and Pid., op. cit., vol. i. p. 829; Pereira, op. cit., p. 1485; Wood, op. cit., p. 817, &c. &c. In fact, this action of small doses, —Pereira says, "Very small and repeated doses"—is well known in the treatment of *dyspepsia*, pyrosis, and gastrodynia (see Pereira, &c.)

Is found very successful in the treatment of *chorea* (see Trouss. and Pid., op. cit., vol. i. p. 837, &c.; Wood, op. cit., p. 828, &c.) In fact, Trouss. and Pid. say (ibid), "Now-a-days, the employment of *nux vomica* in the treatment of *chorea* has become almost general." Has been used with great success in *epilepsy* (see paper by Mr. Tyrrell. Medical Times and Gazette, April 18, 1868; Wood, op. cit., p. 829, &c.). Pereira (op. cit., p. 1492) naïvely remarks, "But judging from its physiological effects, it would appear to be calculated to act injuriously, rather than beneficially, in this disease."

29. OPIUM.

Produces nausea and *vomiting* (Trouss. and Pid., op. cit., vol. ii. pp. 15, &c.; Taylor on Poisons, p. 587; Christison, op. cit., p. 711; Pereira, op. cit., p. 2110).

Is well known to produce other disorder of the stomach, as loss of appetite, and troubles of digestion.

Sometimes produces diarrhœa. (Trouss. and Pid., op. cit., vol. ii. pp.

Trouss. and Pid. (op. cit., vol. ii. p. 38) say, "Opium is one of the best means to oppose the symptom *vomiting*; but it must be remembered that opium, inasmuch as it determines certain nervous accidents, is of itself a *very powerful cause of vomiting*" (see also Waring, op. cit., p. 517, and Wood, op. cit., pp. 747, 752).

Trouss. and Pid. say (ibid), "In a sufficiently large number of *dyspeptics*, opium is the most efficacious means to stimulate the appetite, and regulate the work of digestion."

In smaller doses it constipates, and is constantly given in diarrhœa.

18, 19, and 39). In p. 39 they say, "Given internally, and especially when it is given in large doses, it *constipates at first*, but after some days it too often provokes *diarrhœa* in those who have not had it before," (see also Christison, op. cit., p. 711, and Taylor, op. cit., p. 587).

In the form of Dover's powder especially, it produces *sweating*, and is continually prescribed with this object.

Is well known to produce sleep.

Handfield Jones (op. cit., p. 546) says, "Nay, even Dover's powder I have found, in accordance with Descamp's recommendation, *materially to check the night sweats* of phthisis."

It is also well known that smaller doses than will produce sleep cause instead a state of excitement. This is well known, and often spoken of as its "primary stimulant action." Handfield Jones, e.g., says (op. cit., p. 287), "Opium exerts, unquestionably, in many persons a *stimulating* power, at least when given in moderate doses, and in the early period of its action. Thus it comes to pass that, if the cerebral tissue be highly hyperæsthetic, opium, unless given in large doses, is apt to produce an effect the very reverse of sedative." After giving opium for some time to produce sleep, Trouss. and Pid. say, "But when we leave off this treatment, after employing it for some days, the most obstinate *sleeplessness* fatigues the patient, who for several weeks may find it impossible to sleep" (op. cit., vol. ii. p. 24).

See a case of "soporose delirium" cured by opium (Handfield Jones, op. cit., pp. 69-73).

30. PERMANGANATE OF POTASH.

The only experiment, so far as I am aware, made on man to prove the action of this medicine in large doses is recorded by Dr. C. H. Allen of America. He, his partner, and two students made experiments on themselves with similar results. Dr. Allen is Professor of

In the Edin. Med. Journal, Feb. 1867, and in the London Medical Review for 1841, we find papers by Dr. Campbell of Dunse, and Dr. Charles Bell of Edinburgh, respectively, in which the Permanganate of Potash is recommended in the highest terms as

Anatomy in one of the American Colleges, and though he is a Homœopath, and the experiments are recorded in a Homœopathic journal (American Homœopathic Observer, 1866) yet in the absence of other experiments of which I am aware, his statements as to matters of fact, as produced on himself, will not, I think, be called in question by any reasonable man. He found the main action of the medicine to be on the *throat*. He took in 10 days, in divided doses, 221 grains. His throat became swelled and very painful, with constant efforts at deglutition, which were very painful. The fauces and pharynx were dark red with livid spots; speech thick and obstructed, as occurs in badly swelled throats, and breath very offensive, there was sanious discharge from the nose, thirst, nausea, fever and sleeplessness; difficulty in opening the mouth, from tenderness of the parotid gland and muscles of the neck; along with this there was great prostration, so that he could hardly stand, but had to lie down. These effects, which could hardly be supposed to be imaginary by the most sceptical Allopath, must be admitted as of as much value as a physiological experiment, as if taken from a standard work on Toxicology.

a means of treatment in *Diphtheria*. Dr. Campbell says he has cured cases which, but for the permanganate, he would have considered hopeless. He gave it as a gargle (10 grs. to a pint), and directed the patient to swallow a little of it. Dr. Evans of Cheshunt writes to the Med. Times, Oct. 27, 1867, to the same effect. Of course, it is needless to say that Dr. Allen who made these heroic experiments on himself at once saw in it a remedy for diphtheria.

31. RHUBARB.

Is well known to produce purging in large or "medicinal" doses.

Is used frequently in the treatment of diarrhœa, and sometimes dysentery, alone or in the form of Gregory's powder. (See Trouss. and Pid., vol. i. op. cit. p. 777; Waring, op. cit. p. 625; Pereira, op. cit. pp. 1359, 1360; Wood, op. cit. vol. ii. pp. 489, 490.)

32. RHUS TOXICODENDRON.

Produces a *skin eruption* exactly like erysipelas, with vesicles here and there, on the hands, arms, face, &c., with heat, itching, and pain. (See Trouss.

Trouss. and Pid. say (op. cit. vol. i. p. 846) "This curious action," alluded to in the opposite column, "of Rhus on the economy has led the homœo-

and Pid., op. cit. vol. i. p. 846 ; Pereira, op. cit. p. 1891 ; and a case published by Dr. Sanders of Edinburgh, in Edin. Med. Journ., Feb., 1868.

paths to employ this substance in diseases of the *skin* ; but *already, before them*, Dufresnoy of Valenciennes had published a paper in which he highly praised the virtues of this plant against skin diseases, and, later, against paralysis. Since that time we have found from time to time essays on this substance in the different periodicals, and *many reliable physicians have confirmed* Dufresnoy's experiences."

33. RUE (RUTA).

Is well known to medical men to be capable of producing abortion, and as an emmenagogue. It causes "an active *sanguine congestion* in the *uterus*, and a stimulation of its muscular fibres, which determines their contraction." (Trouss. and Pidoux, op. cit. vol. ii. p. 606.)

Dr. Beau (Trouss. and Pid., op. cit., vol ii. p. 607,) recommends it along with savine in metrorrhagia. "In the anæmia consecutive on passive menorrhagia, M. Beau says he has obtained good results from the combination of rue and iron (1 to 2 centigrammes—about $\frac{1}{8}$ grain of powdered rue in the day), and he continues this treatment for some time to prevent relapses" (ibid).

34. SAVIN (SABINA).

"The emmenagogue properties of savin are more marked than those of rue. Its action goes sometimes the length of producing serious irritative congestions of the *uterus*, and *violent menorrhagia*." (Trouss. and Pid., op. cit., vol. ii. p. 606.)

"Dr. Beau recommends against *metrorrhagia* a mixture of the powder of rue and of savin ; he considers this mixture as possessing superior efficacy to that of ergot of rye." He gives $1\frac{1}{2}$ grains of savin night and morning. (Trouss. and Pid., op. cit., vol. ii. p. 607.)

35. SILVER (ARGENTUM).

NITRATE OF SILVER.

Produces in an overdose *pain* in the *stomach*, nausea, *vomiting*, *purgings*, with irritation of the *gastric mucous membrane*. (Pereira, op. cit., p. 886 ; Wood, op. cit., vol. i. p. 391.)

Pereira (op. cit., p. 887,) says, "In chronic affections of the *stomach*, (especially of *morbid sensibility* of the gastric and intestinal nerves) it has been favourably spoken of by Autenreith, Dr. James Johnson, and Rueff. It has been employed to allay chronic *vomiting* connected with disordered innervation, as well as with disease of the stomach (schirrus and cancer), and to relieve gastrodynia."

“In very small doses, nitrate of silver produces no other observable effect than those of a gentle *tonic* and astringent ; as improved appetite, invigorated digestion, and perhaps a tendency to constipation. . . . It has been recommended in certain *painful* affections sometimes dependent on *dyspepsia*, as gastrodynia and pyrosis ; and has been found useful in morbid sensitiveness of the stomach. But it is vastly more beneficial, given rather freely, through its alterative action upon the mucous membrane, in a state of chronic *inflammation* and ulceration ; and has been strenuously recommended even in active irritation or acute inflammation of the same tissue. In chronic *gastritis*, of the worst kind, I know of no remedy so effectual as nitrate of silver.” The rest of this interesting passage, with cases, is too long to quote (Wood, op. cit. vol. i. pp. 391, 395, 396) ; see also, Waring, op. cit., pp. 103, 104, 120, where numerous other authorities are quoted ; see Trouss. and Pid. on the use of nitrate of silver in *diarrhœa*, acute and chronic, of children and adults—in dysentery, and acute and chronic *enteritis*. The full quotations would take up too much room, so I simply refer the reader to Trouss. and Pid., op. cit., vol. i. p. 481 ; Wood, op. cit., vol. i. p. 396, 397 ; Waring, op. cit., p. 104, 105, and 106.

Produces *epileptiform convulsions*
Christison (op cit., p. 493) gives a case where the man was found “insensible, with his eyes turned up, the pupils dilated, the jaws locked, and the arms and face agitated with convulsions.” Here is an exact picture of an epileptiform attack.

Used externally, as everyone knows, solid, or in a strong solution, it acts as a caustic, and a strong solution is highly irritating to a healthy eye.

For its use in *epilepsy* and *chorea*, see Pereira, op. cit., p. 887 ; Waring (who quotes authorities) op. cit., pp. 111, 112 ; Wood, op. cit., vol. i. p. 399 ; and Trouss. and Pid., op. cit., vol. i. p. 482.

Is much used in weak solution, as a stimulating eye-wash, in inflammation of the eye—also to other surfaces, as to inflamed throat, and ulcers, to produce a gentle stimulation.

36. STRAMONIUM.

In large doses produces "obstinate sleeplessness." (Trouss. and Pid., op. cit., vol. ii., p. 83).

Produces, "in large doses, frequent desire to urinate, with little or no urine (ibid); "sharp fever, with dry, hot skin" (ibid).

In large doses produces "vertigo, agitation, spasms, furious *delirium*, continual *hallucinations*. . . . The delirium is sometimes gay, sometimes sad, but *always* accompanied by singular *hallucinations* and fantastic visions" (ibid)

In a "moderate" dose produces "a slight tendency to sleep." (Trouss. and Pid., op. cit., vol. ii., p. 83).

In "moderate" doses the "urine is more abundant" (ibid).

"Sweats," when there is neither diuresis nor diarrhœa" (ibid).

For cases of *mania*, acute and chronic, and insanity cured by stramonium, see Trouss. and Pid., ibid, pp. 85, 86. They say (ibid) "a sufficiently large number of facts seem to confirm the utility of stramonium employed against mania." They then quote M. Moreau of Tours, who says, "it is especially useful in cases of *monomania with hallucinations*, founding this treatment" say Trouss. and Pid., "on the fact that stramonium *causes* hallucinations, and that mania *ought* to be cured by stramonium in the same way as the *majority of irritant* agents are employed *topically* to *cure* irritations. This application of the 'medication substitutive' has already been indicated by us in the chapter on belladonna." If this is not Homœopathy, what is?

37. SULPHUR AND ITS COMPOUNDS.

(*Sulphide of Potassium, of Calcium, of Sodium, and Sulphurous Acid*).

(a) SULPHUR PURE.

"Sundelin states that sulphur operates specifically on the rectum, and thereby *promotes* critical hæmorrhoidal discharges" (Pereira, op. cit., p. 342.) I know of a case, where a gentleman, when treated for piles with the ordinary allopathic doses of sulphur, had his symptoms invariably aggravated. This he himself observed.

As to the production of *skin* symptoms by sulphur, see under sulphide of potassium.

Its value in *piles* is well known. It is generally given by Allopathists in a laxative dose, but Waring says "It appears to exercise an influence greater than is fairly attributable to its aperient action" (op. cit., p. 705.)

In its use in chronic rheumatism and in *skin* diseases, given internally, Homœopaths and Allopaths are on common ground (see all works on *Materia Medica* and *Therapeutics*.)

(b) SULPHUROUS ACID.

The effects of the inhalation of sulphurous acid are known practically to nearly every one from accidentally inhaling the fumes of burning lucifer matches. They are,—choking feelings in the windpipe, spasm of the glottis, feeling of constriction and pain in the chest, and violent spasmodic cough, showing that it causes considerable irritation of the larynx and bronchial tubes, with spasm of the muscular substance of these parts. (Pereira, op. cit. p. 362; Wood, op. cit. p. 379.)

A violent fit of spasmodic asthma was produced in a gentleman from inhalation of the vapour of burning sulphur (Pairman's "Great Sulphur Cure," &c., p. 20.)

Its value in cases of chronic *catarrh* and *bronchitis*, and in other states of irritation of the respiratory apparatus, are well known since the publication of two pamphlets by Dr. Dewar of Kirkcaldy and Mr. Pairman of Biggar "on the application of sulphurous acid," &c., by Dr. Dewar, and "The Great Sulphur Cure," &c., by Mr. Pairman.

Dr. Munk and M. Dulcos found sulphur internally of great use in spasmodic asthma. (Waring op. cit. p. 704.) For other quotations relative to the use of sulphur in *catarrh* and *bronchitis* see end of article.

(c.) SULPHIDE OF POTASSIUM.

(*Potassa Sulphurata*.—B.P.)

In large doses causes severe *pain* in the stomach and duodenum, *vomiting*, and great depression; and in smaller doses, causes considerable *gastric irritation*, followed by nausea, vomiting, and severe purging. The *stomach* is found *red*, the *lungs soft*, *gorged with black blood*, and *non-crepitant*, indicating *congestion* of the lungs. (Christison, op. cit., p. 249; Scoresby-Jackson, Mat. Med., p. 147, &c. &c.)

For other effects on the respiratory apparatus, see under the effects of the natural sulphurous waters.

In the form of baths, it produces a very sharp irritation of the skin, and also "eruption of small papules, and often a painful and confluent vesicular eruption. This eruption, which is often "critical," is well-known at the natural sulphurous springs as "la poussée," and is often purposely produced (Trouss. and Pid., op. cit., vol. ii. pp. 697, 698.)

Dr. Todd recommends it in *dyspepsia*, where the mucous follicles are supposed to be implicated (Waring, op. cit., p. 569.)

"Has an incontestible efficacy in chronic *pulmonary catarrh*" (Trouss. and Pid., op. cit., vol. ii. p. 696,)

Trouss. and Pid. (op. cit., vol. ii. p. 700) say of the effects of the natural sulphurous waters, "It is rare that patients do not experience a sensation of sharp heat in the larynx and isthmus faucium, a dry, stifling, or choking peculiar *cough*, with a constrictive irritation at the entrance of the respiratory passages, some dyspnoea, mingled with a feeling of weight and oppression in the chest, vague pains in the chest-walls, principally under the clavicles. . We have observed that persons who take the waters of Eaux-Bonnes, *very readily contract catarrh*, especially the first time they use them. In persons already affected with chronic irritation, more or less deep-seated, of the respiratory apparatus, the least cold produces *bronchitis* and *pulmonary congestion*." They (the waters) may even produce hæmoptysis.

Trouss. and Pid. (op. cit., vol. ii. pp. 701, 702) say, "The maladies in the treatment of which the waters of Eaux - Bonnes manifest particularly their therapeutic properties are—(1.) Susceptibility to *catarrh* of the isthmus faucium, of the larynx, and of the *bronchi*, especially the latter. (2.) Chronic *inflammation*, and confirmed catarrh of these organs, whether simple or spasmodic, whether co-existing with emphysema or not. (3.) In follicular sore throat. (4.) In *phthisis*. . . It is against this (phthisis) that the mineral waters of Eaux-Bonnes show a power, with which none of our officinal drugs can compare. . . . Lengthened clinical experience has pronounced on the efficacy of the waters of Eaux-Bonnes in these different affections." I have already quoted a passage in which these authors say that "sulphide of potassium given internally has an incontestible efficacy in chronic pulmonary catarrh. Of the sulphide of calcium (the hepar sulphuris of the Homœopaths), Trouss. and Pid. (ibid, p. 695) say, "It remains an acquired fact in science that chronic catarrh may be happily modified by the sulphide of calcium."

Graves recommends sulphur with cream of tartar in chronic bronchitis (Waring op. cit. p. 704.)

"In pulmonary affections, as chronic catarrhs and asthma, sulphur is sometimes useful." Pereira, op. cit. p. 343.

"In chronic catarrh, particularly attended with excessive and exhausting expectoration, it (sulphur) acts beneficially probably by a direct stimulant and alterative influence on the diseased membrane. It has, from the earliest times of its employment, had some reputation in bronchial diseases." Wood, op. cit. vol. ii. p. 376. See also Garrod. Mat. Med. 3d edit. p. 18, and Scoresby-Jackson, op. cit. p. 143.

38. TURPENTINE AND OIL OF TURPENTINE.

That turpentine has an affinity for the *kidneys* and *urinary tract* of mucous membrane is well known. Trouss. and Pid., op. cit. vol. ii. p. 611, give its physiological action as follows:—"It produces *pain* and considerable *heat* in the lumbar region, principally at the points which correspond to the *kidneys*, also in the hypogastric region. This region is *painful on pressure*, which determines, as in acute cystitis, *tenesmus* of the *bladder*, pains in the urethra and *strangury*; then *ardor urinæ*, *dysuria*, sharp burning *pain*, sometimes a true urethritis; the urine is *scanty*, red, even *bloody*. . . . The mucous membranes are dry as in the first period of a catarrhal affection; they are injected, turgid, and hot." Other quotations are unnecessary. See Wood, op. cit. vol. ii. p. 604, and other writers on Toxicology and materia medica.

Trouss. and Pid. (op. cit., vol. ii. p. 613), say "The observation of the physiological action of turpentine has taught us that this substance principally exerts its excitation on the system of mucous membranes, which it evidently irritates; but we have also observed that the mucous membrane of the urinary passages is that of all others, which feels most keenly and sometimes exclusively this irritant action. *It is precisely against affections of this mucous membrane* that Turpentine has the *most incontestible* efficacy. We shall see further on that the essential oil has been employed in the most acute catarrh of the bladder. We confine ourselves at present to the study of chronic *catarrh of the bladder* in its rapports with turpentine." The rest of this passage is too long to quote, but we commend it to the attention of medical readers. "The efficacy of this treatment of chronic catarrh of the bladder is such that we may say without rashness that if the wise and well indicated administration of turpentine does not always completely cure this malady, it almost constantly ameliorates the state of the patients" (ibid, p. 614). These authors say that they have not had any clinical observations as to its curative action in inflammation of the kidney, but they quote from M. Avisard, who took his facts from Dupuytren, as follows: That in chronic catarrh of the bladder, "when we suspect the co-existence of an affection of the kidneys and ureters, we ought to abstain from the use of turpentine, which frequently only aggravates the evil; but that, notwithstanding, it has been sometimes useful in like cases. Trouss. and Pid. then go on to say that in a state of "idiopathic catarrh" of the *kidneys*, "if anything is in accordance with analogy we should be right in thinking that tur-

pentine *ought* to have success in these cases" (ibid p. 619). For similar statements as to its use in "chronic inflammation of the pelvis of the kidney, in which there is reason to suspect ulceration, as indicated by pus or blood in the urine, tracible to a renal origin," (Wood) also in cases where there is "no reason to suspect ulceration, when there is copious mucous or muco-purulent discharge, and the case is destitute of acute symptoms" (ibid), and "in similar affections of the bladder" (ibid), see Wood, op. cit., vol. ii. pp. 605, 606. "In sub-acute and consecutive *nephritis*," Dr. Copland advises turpentine externally and internally. (This is given on the authority of Waring, op. cit., p. 728,) as I cannot find the reference; see also Pereira, op. cit., p. 1195.

Produces *hæmorrhage* from the kidneys and urinary passages, see quotations from Trouss. and Pid., vol. ii. p. 611, already given, and from Wood, vol. ii. p. 604, already referred to.

Wood says (op. cit., vol. ii. p. 606), "In *hæmorrhage* from the urinary passages, when purely passive, or sustained by habit, oil of turpentine is one of the *best* hæmostatics that can be used."

Mr. Vincent (Edin. Med. and Surg. Jour., Jan., 1849) found it successful in similar cases.

"In *suppression* of urine, I have seen oil of turpentine succeed in reproducing the urinary secretion when other powerful diuretics had failed" (Pereira, op. cit. p. 1197.)

Is well known to act as a *purgative*, and is often given for this purpose.

"Baglivi and Van Swieten have found great success with it in chronic and colliquative *diarrhæa*. . . . These effects, in appearance contradictory" (contrasted with its purgative action), "nevertheless, involve *no* contradiction. . . . There is nothing astonishing in that turpentine may be given as a laxative, since, in the examination of its physiological and therapeutical action, we have seen that it frequently produces alvine evacuations. But it is nothing *any more* astonishing that it may arrest a mucous flux of the intestine, since it acts on other morbid se-

cretions in the same way, as its dessicative property is most characteristic" (Trouss. & Pid., op. cit., vol. ii., pp. 621, 622.)

For its value, in *typhoid fever*, in which diarrhœa is a constant symptom; in diarrhœa occurring during scarlet fever; and in diarrhœa and dysentery, see Wood, op. cit., vol. i. pp. 563-565. Wood states distinctly that its use as a mere stimulant in typhoid fever is nil, but its value is seen when ulceration of the bowels occurs.

"As to the effect which we have said to be produced in some cases on the *nervous system of the limbs*, it consists in an *exquisite sensibility especially in the inferior extremities*; a general feeling of *pain* in these parts, but existing more specially in the *track of the large nerves*. A *headache* of the most acute kind, and persisting a long time after the cessation of the other effects, is also one of the most constant of the effects of a somewhat prolonged use of turpentine." (Trouss. and Pid., op. cit. vol. ii. p. 611.)

For its great curative value given internally in *rheumatism* and *neuralgia* of the inferior extremities, especially *sciatica*, See Trouss. and Pid. op. cit. vol. ii. pp. 622 - 625. The passage is too long to quote. Pereira, op. cit. p. 1196; Waring, op. cit. p. 731. The first two authors maintain that it has this anti-neuralgic property independent of any purgative or any other derivative property. For its use in "nervous headaches," see Waring, op. cit. p. 732, and Graves, op. cit. p. 678.

39. VALERIAN.

Produces *headache* and *vertigo*, such as is felt after a bleeding or from hunger (Trouss. and Pid., op. cit., vol. ii. p. 224).

"In certain animals, it throws into confusion (*bouleverse*) sensibility and the muscular functions; this is also what we have observed in certain females and on ourselves, but in a degree much less remarkable. It is then by *exciting artificial nervous phenomena*, analogous to morbid spasms, and consequently in acting on the cerebro-spinal system by means of the ganglionic system that valerian produces its effects" (*ibid*), see also Pereira, op. cit. p. 1582; Wood, op. cit., vol. i. p. 617 who, besides the headache and vertigo, state that it causes *mental excitement, illusions of sight, general agitation, and involuntary muscular movements*.

"The most positive indication of valerian, after that which we have just indicated (*viz.*, hysterical attacks) is that of *vertigo*" (Trouss. and Pid., op. cit., vol. ii. p. 228).

Its uses in *hysteria*, hysterical *headaches*, and hysterical *spasms* and *paroxysms*, in which we know the sensibility and muscular functions are much disordered, are well known. It has been given with good effect in epilepsy and chorea (see Waring, op. cit., pp. 730, 743) where numerous authorities are quoted. In "*epileptic vertigo*" Trouss. and Pid., (op. cit., vol. ii. p. 226) found it of use.

NOTE TO APPENDIX.

Trousseau's "Medication Substitutive."

To the opponents of Homœopathy who are led by the opinions of "eminent authorities," the fact that such an authority as Trousseau should advocate a system so similar to Homœopathy as his "medication substitutive" is rather awkward. They try to get out of the corner by maintaining that inasmuch as the "substitutive" treatment gives a dose which will at first make the patient worse, while Homœopathy, in choosing the same medicine, only gives it in a dose *less* than will produce this aggravation, that therefore the *principles* are entirely different—the difference being merely that of name, of dose, and of the consequent comfort of the patient. Unfortunately for this way of avoiding the difficulty, it can be shown that it was a knowledge and belief in the doctrines of Hahnemann that gave birth to the "medication substitutive." It is known in France that this theory did not originate with Trousseau, but with the celebrated Bretonneau, whose pupil Trousseau was, and from whom Trousseau quotes so frequently. The rest of the story is better told in the words of the following quotation from a French work. (Not being able to procure the work, I am obliged to make the quotation second-hand.) "Was Bretonneau acquainted with the labours of Hahnemann when he invented his substitution? I reply he was; and I bring in proof of my assertion the evidence of a venerable old man (Dr. Guérin, of Chatillon-sur-Indre, now eighty-seven or eighty-eight, and in full possession of his faculties) who was the fellow-pupil and friend of Bretonneau. That distinguished physician, who has sometimes done me the honour of calling me in to a consultation, is a Homœopath of twenty-five or thirty years' standing. Wishing to know the cause of his conversion, I latterly put some questions to him on the subject, and here is his reply—'It was my friend, Bretonneau, who put me in the way. Having heard of Hahnemann's wonderful cures in Germany, where his new method was much talked of, he resolved to acquaint himself with his works, which struck him forcibly and he imparted his impressions to me. 'There is some good,' said he, 'in that system; it is worth studying.' The confidence with which Bretonneau inspired me set me a thinking in my turn. I studied the system; I understood it; and then, after adequate preparation, I commenced the practice, which I have continued to this day, with success which I had never attained in the old school.' 'But,' said I to M. Guérin, 'how comes it that Bretonneau did not adopt, on his own account, the advice which he felt bound to give to his friends?' 'What are you thinking of?' said the good old Doctor, 'position ties a man down; and the position which Bretonneau had gained among the princes of the medical science could hardly allow him to break openly with antecedents full of brilliant promises for the future, and to emancipate himself with *eclat* from those deadly prejudices of his school which have turned, and continue every day to turn, so many fine intellects from the only way which, in my opinion, can ever give our poor art an ascending direction.' I rejoined, 'Bretonneau was at perfect liberty to accept or reject Hahnemann's doctrine, but could he honestly rob him of his property in order to pervert his system for the benefit of his personal ambition?' 'Have patience,' replied my interlocutor, 'honesty is the best policy. Wait till the hour of reparative justice shall sooner or later declare for the lawful possessor.'"—(CHAUVET, *Le discours de M. Ducloc, Lettre à l'auteur*, Tours, 1867.)